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ABSTRACT

This paper reports the findings of a study which examined the problems of homeless adults in New York City. The goals of the study were twofold: (1) to document and analyze the life circumstances of homeless adults in New York City who are dependent upon the public sector for their sustenance; and (2) to develop explicit standards for the provision of humane residences and services for the mentally disabled in the community. To collect data, informal interviews were conducted with willing homeless persons and with potential helping agents, and the homeless mentally disabled persons were observed. There are 36,000 homeless men and women in the city. The causes of homelessness include unemployment, insufficient decent low-cost housing, and the mass deinstitutionalization of mental patients. The immediate event which precipitates homelessness may include eviction, conditions in prior residences, failure of aftercare provisions for discharged mental patients, withdrawal of familial supports, and loss of income. The paper then examines patterns of survival among the homeless-- their needs, personal resources, and opportunities. Included among the recommendations made are the following. Shelter must be provided during the winter months. The conditions in the men's shelter, the Keener Building, and the Bowery hotels under contract with the city demand immediate attention. The admission regulations at the shelter care center for women are overly restrictive and should be revised. Long-term supportive housing is essential to complete the range of sheltering arrangements needed for homeless adults. Technical assistance and start up funding from both city and state sources should be targeted specifically for groups who wish to establish housing for the homeless. The Social Security Administration and the Department of Social Services should provide special assistance to homeless people. (Author/RM)

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PRIVATE LIVES / PUBLIC SPACES

HOMELESS ADULTS ON THE STREETS OF NEW YORK CITY

by

Ellen Baxter & Kim Hopper

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COMMUNITY SERVICE SOCIETY
Institute for Social Welfare Research
105 East 22nd Street
New York, N.Y. 10010

February 1981

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As the first half-hour waned, certain characters appeared. Here and there in the passing crowds one might see now and then, a loiterer edging interestingly near. A slouchy figure crossed the opposite corner and glanced furtively in his direction. Another came down Fifth Avenue to the corner of Twenty-sixth Street, took a general survey, and hobbled off again. Two or three noticeable Bowery types edged along the Fifth Avenue side of Madison Square, but did not venture over. The soldier, in his cape overcoat, walked a short line of ten feet at his corner, to and fro, indifferently whistling . . . .

The motley company had increased to ten. One or two knew each other and conversed. Others stood off a few feet, not wishing to be in the crowd and yet not counted out. They were peevish, crusty, silent, eying nothing in particular and moving their feet.

There would have been talking soon, but the soldier gave them no chance. Counting sufficient to begin he came forward.

"Beds, eh, all of you?"

There was a general shuffle and murmur of approval.

"Well line up here, I'll see what I can do. I haven't a cent myself."

They fell into a sort of broken, ragged line. One might see, now, some of the chief characteristics by contrast. There was a wooden leg in the line. Hats were all drooping, a group that would ill become a second-hand Hester Street basement collection. Trousers were all warped and frayed at the bottom and coats worn and faded. In the glare of the store lights, some of the faces looked dry and chalky; others were red with blotches and puffed in the cheeks and under the eyes; one or two were rawboned and reminded one of railroad hands. A few spectators came near, drawn by the seemingly conferring group, then more and more, and quickly there was a pushing, gaping crowd. Some one in the line began to talk.

"Silence!" exclaimed the captain. "Now, then, gentlemen, these men are without beds. They have to have some place to sleep tonight. They can't lie out in the streets. I need twelve cents to put one of them to bed. Who will give it to me?"

Theodore Dreiser, Sister Carrie (1900)

FOREWORD

This report is a skillful blend of qualities manifest in enduring literary masterworks about the lives of the dispossessed, such as Hugo's Les Misérables and Gorky's Lower Depths, and ethnographic classics like Oscar Lewis' La Vida and Thomas Belmonte's The Broken Fountain. It rests primarily on direct observation of and one-to-one talks with many apparently representative members of an American nether-world: The rootless, roofless nomads who find fitful rest only in the narrow interstices of public places, open or out-of-sight, on the streets or below -- within the bowels of a great, predominantly affluent metropolis.

The writing is in spare, disciplined, non-technical prose; the poignancy of harsh, enmeshing realities conveyed in episodes and vignettes of severely wounded people behaving and speaking casually in self-revealing ways.

The authors carried out their night-shift fieldwork with the meticulous care of seasoned social scientists, alert to avoid potential pitfalls and biases. Their findings, inter alia, spike a number of popular images about their subject population. To mention only two: The homeless include no small number of rather respectably attired people who do not fit the tattered "derelict" and "bag lady" stereotypes. Nor by any means are they all chronic "psychos" or "winos." Many are "the displaced persons" of the 1970 generation, of impoverished or shattered families of origin, unemployed, physically disabled, or the kin-bereft elderly. All are the "fall out" rejects of a highly competitive, cornucopian socioeconomic system that cannot mobilize the fiscal wherewithal and organizational talents for quasi-family care of its casualties.

The researchers carried the mandate of the sponsoring Community Service Society to locate, identify, measure and analyze the problem of homelessness; this, to provide sound empirical bases for policies which might effectively relieve the victims and the community of that socially-rooted problem. They appropriately designate their mandate as "advocacy research," and implement it with a concluding chapter of "Recommendations."

The processes they have generated bear the clear imprint of these stirring words of Emma Lazarus inscribed on the base of the Statue of Liberty that was erected at the threshold of New York's harbor to beckon to the millions:

> Give me your tired, your poor,
> Your huddled masses, yearning to breathe free ...
> Send these, the homeless, tempest tossed, to me:
> I lift my lamp beside the golden door.

Leo Srole, Ph.D.
Professor Emeritus of Social Sciences,
Columbia University Faculty of Medicine

February 1981

PREFACE

According to official estimates there are 36,000 homeless men and women in New York City - a shocking statistic reflective of unrelenting social crisis. The sights of shabbily dressed persons seeking to retrieve food from trash containers, huddling in doorways or on steam escapes to keep warm in the winter, or attempting to sleep in public places are common and disturbing. They point to a population which, however confused or disturbed some of its members may be, is also experiencing great difficulty addressing survival problems. In some of its previous research the Institute has examined the experiences of older persons who had special difficulties in addressing problems of daily living on an independent basis. That research suggested that it might be useful also to study the experiences of the adult mentally disabled dealing with day-to-day survival problems. For various populations with serious functional disabilities, we assume that the public has a responsibility to respond to self care deficits by offering help which assures a quality of life consistent with some minimal humane standards. The superficial evidence which confronts Manhattan pedestrians suggests that something is seriously wrong. It appears that large numbers of chronically mentally disabled persons living on their own are leading lives highly deficient in provisions for shelter, food, security and hygiene.

In light of the availability of income maintenance payments for the disabled through the SSI program and the City's longstanding committment to provide food and shelter to those in dire need, we were puzzled by what we saw. Were there serious deficits in the assistance available to the mentally disabled? Could the conditions we saw be explained by a lack of knowledge of services? By a refusal on the part of the chronically mentally disabled to make use of available assistance? Or was it perhaps that the needed services simply do not exist or are not sufficient? To the extent that assistance was available but refused, we sought an explanation. Perhaps there were good reasons for refusal of the assistance we presumed to be available. It seemed possible that potential sources of assistance with survival problems were accompanied by important negative qualities which offset the positive value of what was offered.

To seek answers to these questions, we sought to obtain the perspective of the chronically mentally disabled as they were confronted by day-to-day survival problems. From the outset, it was evident that the situation did not readily lend itself to study by conventional survey research methods. These were people for the most part long since lost to the mental health system, people without records (in many cases) or addresses (in most), the details of whose lives were a virtual mystery to the public service agencies charged with their care. It was clear that it would be difficult to define precisely the population we hoped to study. Further, it would be difficult to locate some of those we hoped to include. Even more important, we were uncertain about the willingness of the chronically mentally disabled to participate in the research and about their ability to provide useful information. In light of these considerations, we defined our inquiry as an exploratory venture for which qualitative research methods were most appropriate. We were content to concern ourselves with a portion of the settings in which the homeless and the chronically mentally disabled among them, might be found. We developed a broad data collection framework which we have sought to fill in opportunistically, through informal interviews with willing homeless persons, through similar interviews with potential helping agents, and through observation of the mentally disabled as they addressed their day-to-day problems.

All research of this sort is social class biased to a certain unavoidable extent. The research community is largely middle-class. Our sense of decency and justice is offended by the sight of people lacking even the most minimal trappings of a decent livelihood. This does not mean that any research effort stemming from the conviction that something is seriously wrong with things as they are is thereby flawed by sentiment. It is important to distinguish between the motivation behind a certain study and the actual conduct of inquiry. While both are arguably affected by one's stated sympathy for the subjects of the study, we would suggest that it is possible to compensate or correct for possible bias in the latter instance. Especially important in this regard has been the use of participant-observer techniques (described in some detail in the body of this report). These enable the researcher to gain some sense of the world (or worlds) inhabited by informants. Independent observation and repeated contacts help to ensure that one's impressions are trustworthy. As social scientists, we are concerned with the validity of our observations and the soundness of our interpretations. While the techniques we have employed do not guarantee objectivity in the strict sense, they nonetheless have served as a safeguard against the more flagrant errors of bias.

From the outset, we have seen this study as a means ultimately of seeking improved conditions for the mentally disabled. We believe that public policy could be more effectively designed were it formulated on a more informed basis. It might be admitted that from a scientific perspective, our effort is a flawed one. As an exploratory study, the inquiry could be no more than a description and analysis of field-tested impressions and a source of hypotheses. To this limitation, we have a dual response. We are sufficiently alarmed by what we have uncovered to believe that remedial action is urgently needed in spite of the residual scientific difficulties. We also hope that our study will lead to further research with greater methodological strength.

The present interim report focuses on that portion of the dependent disabled population which is homeless. The body of the report is a straightforward presentation of findings. To this we append a critical interpretation of the problem of homelessness and set out a number of major recommendations regarding the immediate provision of shelter. In subsequent reports we expect to describe the circumstances of the mentally disabled in other residential settings. We will draw upon our findings and analytic framework to develop recommendations for practitioners, public officials, medical personnel, service workers and others in regular contact with the homeless. We will expand upon our ideas about shelters for the mentally disabled. In addition, we will explore the possibility of developing a framework of standards which might be used in monitoring the adequacy of public response to the problems of the mentally disabled living independently.

We are grateful for the partial research funding provided by the Ittleson Foundation, Inc.

Francis G. Caro, Ph.D.
Director, Institute for
Social Welfare Research

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INTRODUCTION

The Quality of Life Project is an exploratory/advocacy research study of the life circumstances of mentally disabled adults living in the community of New York City. The first Interim Report* presented the goals of the project, a brief statement of the New York experience in deinstitutionalization in historical context, a descriptive review of the various community settings where the mentally disabled living independently from families reside (single room occupancy hotels, the publicly operated Men and Women's Shelters, private proprietary homes for adults, and group homes) and the financial entitlements upon which many are dependent (Supplemental Security Income, Home Relief, Emergency Assistance, Medical Assistance).

The following report is an intensive study of one subgroup of the disenfranchised in the community: the homeless. This group was selected to be studied closely because they are in the most desperate circumstances. These are people who over the course of their lives have made the rounds of mental hospitals, single room occupancy hotels (SROs) and adult homes, but for whom, for a variety of reasons, such arrangements

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*Baxter, E. and Hopper, K. "Interim Report: Quality of Life of Mentally Disabled Adults in Community Settings." Community Service Society, New York, N.Y., September 1979. Adapted versions: the first, entitled "Pathologies of Place and Disorders of Mind: 'Community Living' for Ex-Mental Patients in New York City," was published in the March/April 1980 issues of *Health/PAC Bulletin* and the second, entitled "Poor Housing for Mentally Disabled Harms 'Community Living' Policy," in two issues of *City Limits*, Vol. 5, Nos. 3 and 4, 1980.

fell apart. Analysis of the problem of homelessness shows the inadequacies of a conventional "service" approach and suggests instead that "therapeutic" and everyday "survival" needs must be considered simultaneously. The project's basic thrust is to shift the focus from rehabilitation, the attempt to return the disabled to normalcy, to welfare. This is not meant to imply that the homeless and disabled are irrecoverable; rather, it is to insist that until basic needs have been met and the state of dependency granted some measure of dignity, rehabilitative efforts are premature and of limited value.

The numbers are formidable, even if an accurate count is impossible. Nor does this seem to be a phenomenon peculiar to New York. Other cities in the northeast corridor, from Washington to Boston, report figures of roughly the same order of magnitude. The evidence in the streets, the news media and the courts (to be described below) testifies to the fact that homelessness is a pressing social problem today. It should be stressed that many veterans of life on the avenues are not returnees from state mental hospitals; the "street culture" of the homeless has long been of interest to a variety of investigators. But the presence of large numbers of ex-patients appears to have affected at least certain of the salient features of that way of life. This report will summarize our methods of inquiry over the last twelve months and present our findings to date.

It is divided into five parts:

> Part I attempts in a provisional fashion to estimate the magnitude of the problem. Statistics -- perhaps "guesstimates" is a more accurate term -- are presented for New York City and several other major eastern seaboard cities. Also included is a review of the media portrayals of homelessness and of the class action suit filed against the city and state on behalf of homeless men.
>
> Part II discusses our study methods and field techniques.
>
> Part III presents our findings in preliminary form. It is divided into two sections: the first dealing with the origins of homelessness; the second, with strategies of survival on the streets. Examples culled from our fieldnotes illustrate, wherever possible, the particular phenomenon under discussion.*
>
> Part IV discusses our findings.
>
> Part V presents our recommendations.

We define the homeless as those whose primary nighttime residence** is either in the publicly or privately operated shelters or in the streets, in doorways, train stations and bus terminals, public plazas and parks, subways, abandoned buildings, loading docks and other well-hidden sites known only to their users. This working definition has the double advantage of being relatively easy to apply and of being congruent with (as far as one can tell) the definitions used in official enumerations of the homeless. (The U.S. Government Census estimates typically include a "mission count" of people sleeping in designated shelters and a "casual count" of people sleeping on the streets.) If anything, this measure underestimates the numbers involved. Many of the more disabled tenants of SRO hotels, for example, have been on the streets in the past and are likely to wind up there again given a disturbance in the daily course of events. These are delicately balanced lives, extremely vulnerable to upset, often lacking the resources for redress or appeal; even the most minor threat, real or imagined, can spell catastrophe.

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*In the text, such examples appear as the passages which are indented, single-spaced and dated.

**We use the term nighttime residence instead of "sleeping" because, as discussed below, we found that many homeless people roam the streets at night and sleep fitfully during the day rather than risk being robbed or assaulted in out of the way places at night.

Our first objective in this inquiry was to investigate how street people survive and why they "choose" this means of survival over the "available" alternatives. Two distinct policy issues are pertinent: why people become homeless in the first place, and the nature of public provision of secure shelter and decent food for those persons officially certified as homeless. It will be seen that in practice, one reason why so many homeless people prefer the streets to existing alternatives is the state of existing alternatives.

PART I

MAGNITUDE OF THE PROBLEM

Any attempt to gauge the actual number of homeless people in a given area is subject to myriad difficulties. The estimates that do surface from time to time are notoriously unreliable, subject to wild discrepancies depending upon the methods of estimation used, the source of the figures, the time of the year, and, we strongly suspect, the purpose for which the numbers are put forth. The kinds of living arrangements defined as "homeless" may also vary considerably, adding a further element of uncertainty, and making historical and cross-regional comparisons hazardous.

With these caveats in mind, the following table presents the most recent estimates available of the numbers of homeless in metropolitan areas in the eastern U.S. In each instance, the source of the figures is given.

City	Number of Homeless	Source
New York City	30,000 men	Internal memo, New York State Office of Mental Health, October 12, 1979. Based on estimates by the Men's Shelter staff that they are in contact with 30% (in actual numbers, 9000) of the total population of homeless men over the course of a single year.

City	Number of Homeless	Source
	6,000-6,500 women "periodically homeless" 36,000 total	Manhattan Bowery Corporation "Shopping Bag Ladies. Homeless Women." April 1, 1979. Based on extrapolations from the numbers of women applying to the Women's Shelter during the period 1974-1977.
Washington, D.C.	5,000-10,000	Community for Creative Non-Violence April 1980.
Boston	4,000-8,000	Joint estimate of Pine Street Inn and Dept, of Welfare, May 1980.
Baltimore	8,000-9,000	Project Place, August 1980.
Phildelphia	3,360	Philadelphia Health Management Corporation, 9-17-80. Based on estimates of those who presented disposition problems in emergency rooms and community mental health centers due to being undomiciled, plus the number of available emergency beds (Salvation Army, hospices, etc.). Thought to be an underestimate.

On two separate occasions this spring, the Census Bureau did a count of the homeless in New York. The first was an enumeration of all residents in facilities catering to the homeless (missions, city and private shelters, lodging houses); the second, a casual count of people "sleeping rough" (on the streets, in public buildings, in parks, on the subways, etc.). To date, neither set of figures has been released.

Estimates of the proportion of chronically mentally disabled among the homeless are equally suspect. The figures typically cited are usually culled from the field impressions of outreach workers or "best guesses" of staff workers at the shelter. Diagnostic procedures in each instance are haphazard. A purportedly detailed psychiatric screening of the residents of one of the city shelters (on Wards Island), extending over three days and including some 240 men, was done in May of 1980. The findings of this sample of homeless men show them to be in desperately poor mental health.* This suggests that the State Office of Mental Health estimate (Internal Memo 10/12/79) that 45 to 50% of the homeless are "mentally ill," yielding a total number of between 16,000 and 18,000 mentally disabled homeless adults, is a conservative one.

The accuracy of the above figures cannot be vouched for, nor can the probable error in them be estimated with any precision. Of more importance for our purposes is the fact that these figures represent the dimensions of the problem of homelessness as recognized by the city and state. And it is against such estimates of need that the city's sheltering capacity must be measured. On all accounts, it falls woefully short.

Numbers alone do not make a social problem. That homelessness is perceived with growing urgency as an issue demanding attention and redress is testimony to public outcry, coverage by the mass media and the efforts of advocates. At the same time, the image of this most marginal of human

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*A total of 84% of the men were determined to be mentally ill to some degree. This figure includes diagnoses of alcohol and drug abuse, although those with a primary diagnosis of either alcoholism or drug abuse accounted for a mere 14% of the sample population. Fully 70% of the men were found to be mildly, moderately or severely mentally ill; 60% of them moderately or severely so. Sixteen men were deemed in need of immediate hospitalization.

human conditions has infiltrated mainstream urban culture in curious ways.

In recent years, homelessness has acquired symbolic dimensions beyond those traditionally accorded vagrancy (for which, see Bahr 1973). No longer mere "bums" or "derelicts," street people have become cultural tokens, living symbols of a species of alienation and dispossession peculiar to our times. In theatre, Jean-Claude van Itallie's play "Bag Lady" typifies this trend. The title character is Clara, self-proclaimed "Empress of New York" and a figure of fiercely warring contraries. Dignity alternates with groveling, self-possession with loss of control, rage with longing. Clara's predicament, her confinement at the threshold of polite society, is partly one of her own making. She simply refuses to accept the appointed fate of the disenfranchised; not for her is the hospital or nursing home. In this refusal she is at once heroic and pathetic. That her mind is slipping is at least a partial blessing. Her dreams are untrammeled by age or infirmity, her pride undaunted by circumstance. She is prey to the tricks of a memory no longer always able to distinguish between past and present. She is free to hurl insults at those who disdain a request for a handout. And while these may be poor substitutes for a life secure in the companionship of others, they do at least serve as buffers against further intrusions by a hostile, unfeeling world. Constant vigilance may make her exile complete, but it also enables her to survive. Her life, like her bags, has "only essentials" left.

The symbolic status of homeless people, however, is by no means unambiguous as is attested by the sometimes bizarre use to which their straits can be put. The city's fashion moguls, to take one instance, have been quick to draw a parallel between the blanket-draped women on the streets and that year's "layered look;" designer "shoppings bags" have been introduced for "ladies" (Soho Weekly News April 28, 1977; May 7, 1980). The heartlessness of such exploitation needs no comment. What is worth remarking is the anodyne it represents, the way it serves to trivialize suffering, deflect concern and quell the nagging sense that something must be desperately wrong for people to live like this.

Equally ambiguous has been the attitude of the press, which has run the gamut in the last decade from idle curiousity, to genuine sympathy, to hot indignation at the blight that homeless men and women pose. Early reports in particular were marked by the scorn traditionally accorded skid row denizens. These "derelicts" purportedly had "given up on life, [and didn't] seem to have much will left in them;" because of their "generally passive natures" and bottles in hand they were perceived as "seldom sober long enough to seek medical care" (New York Times, Oct. 23, 1973). Nor were women, when they began to appear in numbers on the street, exempted from suspicion. One story told of how one enterprising beggar kept her sores from healing, the better to elicit sympathy from the crowds she worked. (New York Daily News, July 9, 1977). Other accounts were restricted to one or two individuals, their circumstances romanticized to the pleasing dimensions of a "human Interest" story (New York Sunday News, April 23, 1972; New York Post, Nov. 16, 1976). Such depictions are not without their social consequences. It is difficult to imagine how the media's habit of conjuring stereotypes of the homeless as mysterious, reclusive figures who choose their nomadic lifestyle and refuse any services or assistance offered them (New York Times, April 20, 1979; Chelsea Clinton News, Dec. 6, 1979; Natural History Magazine, Nov. 1978; New York Post, Dec. 18, 1979) could not but reinforce hostility and callousness in the public's mind. The most preposterous myth -- that the "shopping bag ladies" carry bank books or have assets of thousands of dollars hidden away -- has been solidly entrenched in the popular imagination by broad circulation of isolated cases that journalists have happened upon (New York Daily Press, Oct. 13, 1978; Ms. Magazine, March 1977). Coverage of the murder of one such eccentric heiress focused on the curiousity of her existence and made no mention of the fact that the place where she had been staying, a subway entrance near Grand Central, is occupied by many homeless people every night after they are forced to leave the station at closing (New York Times, April 20, 1979). Though it may be true that some have sufficient financial resources to live "inside," they are a minute number and are prevented from obtaining something as simple as a place to live by a host of internal and external obstacles.

In the extreme, portrayals in the press have bordered on the vicious. The throng who ride the subway all night have been depicted as a veritable rogues' gallery: here cluster "the worst of life. . . drunks, vagrants, prostitutes, wild-eyed men with matted hair and beards who may well be insane" (New York Times, April 9, 1980).

Recently, it must be added, several reports have appeared which have not only offered sympathetic portraits of homeless people, but have also made an effort to understand the social forces behind the appearance of so many people on the streets (New York Times, Aug. 14, 1980; New York Daily News, Dec. 14, 1980, Jan. 4, 1981). But a legacy of distortion remains to be dispelled if public support for the establishment of decent shelter is to be garnered.

It happens at times that such reports reach their subjects, homeless people who read accounts of their mysterious lives in discarded newspapers. How they react to such depictions is not generally known. Discordance between what they read and what they experience allows some of them to disassociate themselves from those portrayed; others reject the image altogether. On occasion such attention can be positively harmful, as happened in the spring of 1980 with respect to the men inhabiting the steam tunnels running under Park Avenue near Grand Central Station (see below, p. 76). Other refuges remain secret, their location closely guarded by those who know about them:

> Throughout our numerous conversations on the phone and in person, Jane provides detailed, articulate and incisive commentary of life on the streets. Yet the location of the alleyway lined with cardboard boxes where she sleeps along with several others remains her well-protected secret. She "respects the privilege of being allowed to stay there" and does not wish to threaten their secure arrangement. (6/24/80 and 7/9/80)

Much of the recent attention in the press to the problem of homelessness was spurred by a legal case: Bowery men took the city to court and won, though the victory has proved to be less than complete.

On October 2, 1979, two attorneys for Legal Aid filed a class action suit in the State Supreme Court on behalf of homeless men in the city. The plaintiffs in Callahan v. Carey charged that the city and state had failed to honor their legal responsibilities -- as defined in the state constitution, city charter and legislation dealing with social security and mental hygiene -- to provide shelter for all who are "needy." Specifically, the complaint detailed the insufficient supply of lodging vouchers in the face of an increasing demand; the "dangerous and unhealthy" conditions in the lodging houses for which the city dispensed vouchers; and the intolerable conditions in the section of the city shelter to which those who did not receive vouchers were referred for the night. It also noted that the shelter itself was badly under-staffed and so was unable to provide the services to which men "who are unable to provide for themselves" are entitled. Finally, the suit claimed that because of the well-deserved reputation of the shelter and flophouses as rough, dangerous places, and the demonstrated inability of the city to provide even the minimal necessities to all who require them, many men were forced onto the streets to fend for themselves.

The city's response was curious: it contested few of the factual claims made by the plaintiffs, claimed simply that existing facilities were adequate, but argued mainly that the issue was "non-justiceable" -- that is, not an affair that legitimately falls within the precincts of the courts to decide. The state argued that its consitutional and statutory obligations to the needy were met by programs already in effect, namely, Home Relief, Medicaid and SSI.

Justice Tyler found that the plaintiff's case had merit, that grievous harm was being done and that the city's argument that the court had no jurisdiction was untenable. On December 5, 1979, he directed the city and state to provide an additional 750 beds for homeless men in New York City. The city protested that the extent of actual need had not been demonstrated, and requested that the number of beds be left flexible, to be fixed by the volume of applications for shelter. The judge agreed and on Christmas eve issued an order that the city "provide shelter (including clean bedding, wholesome food and adequate security and supervision" to all who apply at the shelter.

The results of the ruling have been generally favorable. Upper limits on occupancies at a number of lodging houses unaccountably rose during the following months. Court-appointed observers were stationed nightly at the shelter to ensure that no man was turned away for spurious reasons or was dissuaded from applying, and that clients were treated respectfully. The observer's presence has probably served as a deterrent to the worst of the excesses historically visited upon the clientele. In addition, the city took over an abandoned building on Ward's Island -- site of Manhattan State Psychiatric Center and little else -- and contracted with Volunteers of America to run a shelter there (the "Keener Building"). Throughout the winter months of 1979-80, upwards of 250 (sometimes more) men slept there nightly.

The evidence in the news media and the courts described above testifies to the fact of homelessness being a pressing social problem today. What is still not clear is what kind of social problem it poses -- a question to which we will return in our concluding section.

PART II

METHODS

> As I arrived at the hotel, Albert* greeted me saying: "I tried to reach you at the office all day. They told me you had gone to the field." I squirmed with uneasiness at hearing him call his home "the field," but either my response or the actual work delighted him so much that ever since, his parting words inevitably make reference to leaving, looking for, having coffee, talking or wandering in "the field." (December, 1979)

The words "informant" and "the field" as conventionally used reduce people to "research subjects," to be interrogated and rewarded; the circumstances under which they live become a "community laboratory." On those occasions when, out of fatigue or carelessness, we lapsed into jargon, our slips either were met with amusement or anger among the nonresearchers with whom we work closely. Therefore, the standard terms will be avoided in our discussion of methods.

The environments we have investigated include any spaces in which the homeless sleep, stake out a domain, are fed or serviced -- park benches, streetcorners, doorways, subways, train stations, bus and ferry terminals, abandoned buildings, publicly and privately operated shelters, food programs and emergency rooms. The bulk of the work has been conducted in Manhattan, though Queens and Long Beach were surveyed briefly. For comparative purposes, one of us made trips to Boston and Washington, D.C. to gather statistics, gain some first-hand impressions of the extent and quality of available sheltering services and, more generally, to find out exactly what kind of problem homelessness is perceived to be in those areas. Such trips have been mutually fruitful. There has been regular exchange of information on new developments with the contacts made in both cities. These people, many of whom have devoted years to providing shelter for homeless people and advocacy on their behalf, have proven invaluable resources both for their descriptions of the extent of the problem and for their suggestions of a range of possible solutions.

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*All names referring to homeless people throughout this report are fictitious.

Initially, the terrain was mapped out through interviews with individuals and groups who either formerly or currently were serving, researching or advocating on behalf of the homeless:

1) The Dwelling Place -- a small shelter staffed by six live-in nuns who provide in addition to general hospitality, a lunch program serving approximately 50 women a day and sleeping space accommodating 13 on a temporary night-by-night basis.

2) The Coffee Pot -- a ten-year old drop-in center operated by the Moravian Church which provides shelter only during the day, and coffee and meals to between 50 and 80 homeless people and residents of nearby SRO hotels.

3) Mary House and Joseph House -- two shelters run by the Catholic Worker which house and feed about 50 women and 30 men respectively in a permanent "community."

4) Star of the Sea -- a recently established homelike shelter for 17 women in Queens staffed by a nun and three full-time volunteers.

5) St. Francis of Assisi Church -- the site of the fifty year old breadline, formed the day of the Great Crash, and continued since then, where between 300 and 400 men and women line up daily at 7 a.m. for coffee and sandwiches.

6) The Manhattan Bowery Project -- an organization which compiled the most substantive documentation on homeless women available to date.

7) The Columbia Bureau of Applied Social Research -- a large scale research project on homelessness in New York City conducted in the mid sixties which produced material useful for comparative purposes.

8 Ann-Marie Rousseau -- a photojournalist preparing a book for Pilgrim Press on homeless women whose transcripts were graciously made available thereby expanding our own interview material invaluably.

9) Robert Hayes -- the lawyer for the class action suit filed on behalf of homeless men, who has provided us with much information on the background of the suit and on homelessness in general.

10) Bill Muller -- a man with several years of experience in getting people on SSI and into hotels, who estimates he has interviewed 2000 homeless people, has shared his impressions, stories and approach with us.

One contact led to another, information was accumulated, and within a few months, new researchers and reporters were seeking our limited expertise and experienced workers our assistance.

In December 1979, we began in earnest to follow up leads from contacts and from published reports. For several months, we made observations on the habitats of the homeless in a number of different areas of Manhattan and then selected (in part for convenience, in part because of the concentration of homeless often found there) the following sites to be worked most intensively:

Transportation Depots
    Pennsylvania Stationand its immediate environs
    Grand Central Terminal
    George Washington Bus Terminal
    Staten Island Ferry Terminal

Public Shelters
    Men's Shelter on East 3rd Street
    Women's Shelter on Lafayette Street
    Bowery flophouses
    Keener Building

Subways and subway stations

Traffic Islands, Squares and Public Parks
    (especially in the midtown region)

Out-of-the-way Refuges
    Steam tunnels running under Park Avenue, from Grand Central
    Loading docks in commercial districts

Soup kitchens
    Breadline at St. Francis of Assisi Church
    The Coffee Pot
    The Catholic Worker soupline on East First Street

Other sites were periodically discovered and investigated, including hallways and stairwells in occupied buildings, abandoned buildings, the docks along the East and Hudson Rivers, alleyways and heating vents, often with the homeless serving as guides. To date, however, the greatest concentrations of homeless have been found in the above locales.*

Between the two of us, we estimate that we have spoken with hundreds of homeless people, and with scores of them in some depth. We remain in regular contact with 25 or so.

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*Note that Harlem was not included among the areas to be closely studied. This was an oversight on our part: the city opened an armory in East Harlem in January 1981 to house families with no heat in their apartments; by late January, the Red Cross reported to us that 160 single men were staying there each night.

A tattered appearance, bizarre behavior, belongings carried in plastic bags or cardboard boxes tied with string, swollen ulcerated legs or apparent aimlessness: these are the obvious features which distinguish the homeless from other pedestrians and travelers. But there are also those who have been able to maintain a reasonably good personal appearance and whose behavior betrays no apparent sign of disorder and they are often overlooked by casual observation. Their presence during late night hours when commuters have gone home and stores have closed, and especially their repeated presence in the same sites days or weeks later, is the only telling sign. After midnight, a prime time for research, the homeless become the majority in the waiting rooms of stations and terminals.

Our method of approach generally began with observation. We usually made no attempt to conceal our own presence. Generally, we made offers of food, coffee, cigarettes, or change as a way of initiating conversation. For reasons of mutual ease, the female researcher approached women and the male researcher approached men, in most but not all cases. Initially as perfect strangers, we introduced ourselves with varying awkwardness and honesty as researchers on homelessness -- a role neither easily fathomed nor of direct benefit to themselves. The confusion which sometimes ensued brought about a change in our tactics of approach. After getting several responses of disbelief, misunderstanding, or simply no interest in who we were, we modified this forthright approach somewhat and delayed going into the purpose of our inquiry until whenever it seemed appropriate (usually the second or third contact) or when asked. In simplest terms, we generally described our work as that of "writers" (or, if it seems the person has some notion of the term, as "researchers") doing a "story" (or "project") on homelessness in New York City. The regularity which we ourselves were assumed to be homeless, despite our favorable appearances and good health, was a bit unnerving. We tried not to exploit the fiction (except on two occasions when we purposefully posed as homeless ourselves).* And while a determined effort not to deceive or mislead the people who agreed to speak with us in any way remained a guiding principle, it was not always clear that their consent was truly "informed."

In addition to direct observations and interviews with homeless people, information was obtained from others who work or are connected in some way with homeless individuals. It may be that such second-hand accounts are embellished and open to alternative explanations. However, when taken with caution and cross-checked among different sources, such information has proven to be valuable.

Contrary to the popular image of the homeless as reclusive social beings, the great majority have been willing to share their life stories and daily travails with us. For the most part, social graces persist on the streets: offers were accepted or rejected politely; inquiries as to one's health and welfare were reciprocal; niceties, apologies and parting words were exchanged. A few rejected any offer of contact. Others accepted the proffered food, cigarettes, or coffee but avoided conversation either by remaining silent, moving away, mumbling or clearly voicing refusals. But the norm, however unexpected it may have been at the outset of our research, was the startling ease with which even an obviously troubled individual, quarreling loudly with invisible adversaries, could assume a pose of calm self-possession and politely decline one's offer of coffee or cigarettes -- protesting "business to attend to," explaining that they had enough money to buy coffee ("should I want some") or simply smiling shyly and shaking their head "No."

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*On two occasions, the researchers ventured into public sheltering facilities overnight: K.H. into a flophouse grandly named The Palace; and E.B. into the Women's Shelter. Both of these incursions were made incognito. Our observations are reported in Part III.

Those who turned us down could be quite pointed about it:

> Penn Station: I approached an elderly, scowling man, lugging several bags around, who was making his way -- with great dispatch and efficiency -- from one trash bin to the next, sifting through their contents for discarded valuables or food. He dismissed my offer of coffee with a curt expletive, adding rhetorically: "Haven't you people done enough damage already?" (Circumstances seemed less than propitious for inquiring as to the identity of "you people.") (2/13/80)

At times it was apparent that our interest was itself suspect, violating as it did unspoken norms of privacy and non-interference:

> Madison Park: Jane wondered how the other people living on the street responded to my approach and questions. She said they don't know who I am or how I will use the information they give, and that I could well be from some agency that wants to take them some place they don't want to be, like an institution of some kind. She herself asks few questions of the people she shares the alleyway with. (7/14/80)

Other "respondents" had been approached before and simply didn't see the point of repeating their story -- such as the older woman parked in the entrance of a store on 34th Street who was more than happy to share her baloney sandwich with the researcher but had already told "some girls from Sarah Lawrence College" what life was like in the street and didn't care to go into it again. Besides, she added:

> "What's the point? Telling people what it's like won't change anything. They see us. They know what it's like. What difference does it make?" (6/1/80)

On occasion, what appeared to be a refusal was in fact a missed signal:

> Penn Station: I walked up to a grey-bearded man rummaging through trash and offered him a cup of coffee. He did not so much as look up to acknowledge my presence, but went on about his business. Having exhausted that bin, he went to the next. On my way out of the station, I was about to pass him again and this time simply handed him the cup of coffee. He saw the cup before he saw me, but once he did, he was happy to talk, if a bit wary about using his name. It turns out he's deaf and never heard my first offer. (2/13/80)

In other cases initial wariness proved to be temporary or gender specific. The male researcher approached one pair of sisters early in the spring and was told by one who accepted some money for coffee that their straits were "too difficult to talk about - maybe some other time." A few days later, the other, more aggressive sister replied to his offer of money with a curt: "No, we're not friendly," before moving the two of them on. Four months later, the female researcher had better luck:

> Penn Station: Spent two hours with the homeless sisters who were sitting along with many others on the stoop outside the station listening to a street band. I offered the one closest to me some coffee or lunch, but she completely ignored me as if she hadn't heard. I presumed she did hear because she was tapping her foot in time to the music. I sat next to her quietly for another fifteen minutes and offered again. This time she responded, "No, the food will be poisoned. And I don't eat poison." When she left, I asked her sister if she would like some coffee. She said "no" with a warm smile and added, "But we could use some dimes." I gave her a handful of change and we talked at length until the first sister returned and cut off the conversation. (6/2/80)

A large number of contacts proved to be wholly uninformative to all but devotees of clinical detail:

> Grand Central: A man in blue jeans was walking very hastily around the central space near the information booth. I placed myself in his path and offered him a cigarette which he accepted. He proceeded to recite three lengthy poems, the first a pornographic one ("a poem of the devil"), the second, "a poem of God" and the third, "a poem of love." Before I could respond he left saying, "I'll leave you now, hoping that you'll take the last two poems into your heart and forget the devil's poem." (3/14/80)
>
> Grand Central: An older man, fairly rag-tag in his dress, took me up on my offer of coffee. Started off with: "They always get me confused with historical characters." And then launched into a long paeon to the heroics of "psychologists" -- unbroken save by my futile efforts to ask some rather homespun questions (like: do you live around here?) which he would answer by yet another comment on these dauntless explorers of the mind -- all of which to my unlettered ear, was virtually incomprehensible. At one point -- perhaps a nod in the direction of my obvious bewilderment: "You may not understand someone. You may agree or disagree. But at least you can give his argument a hearing and go to your front porch and tip your hat." (12/6/79)

Others started out that way, but eventually got around to details of day-to-day survival. Obviously, the quality and quantity of interview material on individuals varied greatly. Conversations were often (but not always) coherent, usually discursive, with rich, detailed coverage of certain areas of interest, sketchy or blank in others. Some invaluable contacts told us not only about their own lives and survival strategies but about things they have heard from others. Some could not be dissuaded from the singular woe they tell over and over again. After repeated contacts with individuals, many of the gaps could be filled in, though continuity was not easily maintained because of their mobility in response to changing weather conditions and run-ins with the police. Some were displaced permanently and could not be found again.

Others could be understood owing to severe speech impediments or responded in ways that made further questioning inappropriate:

> Penn Station: So little of Marvin's story seems worth recording. He is extremely articulate, his conversation lively but totally unbelievable. He rambled on and on about being in art school, teaching art, the millionaire that is going to back his art work, his intentions to carve a mountain in Vermont and working on his sculpture that morning. We arranged to meet the following day, but he never showed. A few days later he called collect from Monticello asking that I forward an $11 bus fare so that he could return to New York. We met again upon his return and he explained that he had been working at a hotel in Monticello, was fired and now suing the manager for $1 million. Somehow the police had picked him up and detained him because a cat that he found and intended to bring back to New York for me had scratched him. (12/18/79)

> Grand Central: I approached a young man writing lists of food items in a notebook and wearing worn out blue sneakers with the laces undone, a torn coat and a cap, who, it turned out, had been on the streets for four years. He was so plagued by the clumps of lice that infested his beard, long hair and body, that throughout our conversation he was vigourously reaching into his sleeves and pants to scratch. His very soft-spoken words, avoidance of eye contact and constant scratching made it extremely difficult to hear his story. One ironic note: he says he is a graduate of the University of Minnesota with a major in communication. (3/14/80)

Some individuals telephoned or arranged meeting places for follow-up interviews. Generally, though, contacts were made and remade by meandering through selected locales. Accessibility was further inhibited through the days and nights by the very practical consideration that people who are dozing or asleep ought not to be awakened. Those who ride the subways are not easily heard above the noise.

Finally, a few of our contacts proved to be little more than Samaritan efforts, concerned mainly with getting someone immediate assistance, either medical attention or emergency shelter. In a number of instances, this has meant discouraging young men from taking advantage of the vouchers dispensed from the men's shelter and lending them carfare to get to a friend's house or some other residence. It was usually quite clear that they had no idea of what they were getting into.

A Note on Advocacy Research:

The nature of the project has involved us in direct assistance to individuals who requested or showed a willingness to accept help in a variety of ways. Most of these were bandaid measures: accompanying them to emergency rooms or shelters; securing a hearing aid; paying for transportation from jail or for recovering their belongings from baggage departments; making small loans to tide them over for a day or week at a time. Assistance has also taken the form of negotiating obstacles of the welfare or SSI systems (sometimes in unorthodox fashion) or searching for permanent housing. Although these efforts often met with failure, occasionally they were successful and paid off in knowledge gained of the system as well as in practical benefits obtained. We regularly passed on information about the location of food and sheltering services. We circulated tips learned from other homeless regarding secure spots to rest at night, the location of bathrooms and the pattern of police surveillance.

Regular contact has greatly reduced the distance between researchers and a number of the homeless to the extent that companionship is sought out and peculiar bonds formed.

Of course, what we have to offer in terms of money, information, social contact and general willingness to do what we can, hardly eases the harshness of their everyday lives and/or changes the course of their future. We, as researchers, are the ones who benefit primarily from the study. Whether the research itself can be put to use as part of a general effort to improve the lot of homeless people in the city remains to be seen.

PART III

FINDINGS

ORIGINS OF HOMELESSNESS

The routes to homelessness are many. Traditional causes include religious pilgrimage, war, famine, social upheaval, the ravages of alcoholism and the lure of the open road. The present century has produced several causes of its own which are particularly relevant to our discussion. In the United States, unemployment was unknown until the late 19th century, and its arrival was signalled on a large scale by the emergence of the "tramp problem" (Garaty 1978:116; Carlin 1979). Decent low-cost housing sufficient to meet the needs of the poor has been a chronic problem in Manhattan throughout the 20th century (Jackson 1976); it remains an acutely scarce resource. In the last fifteen years, a third factor has emerged: massive depopulation of the state mental hospitals. In this section, we discuss briefly each of these and then go on to examine a number of specific "precipitating events," happenings in individual lives which we found to be common antecedents of the decision to take to the streets.

A word of caution about the explanatory power of such events: Rarely, in our estimation, is the mere occurrence of such an event sufficient to account for the consequences sometimes attributed to it. Events are never simple units. They must be contextualized within ways of life and work, coupled with appraisals of individual vulnerability, to be of real analytical significance.

Social and Economic Developments at Large

Mass deinstitutionalization of mental patients: Between 1965 and 1977, New York State released over 126,000 patients from its state hospitals in the New York City area. Excluding deaths and readmissions, this means that an estimated 47,000 former patients now reside in the city. This figure does not include the many thousands who were refused admission under the new stringent entry criteria (Office of the Comptroller 1979). Provisions for appropriate aftercare and needed follow-up have lagged far behind the discharge policy. Many ex-patients lead inconsequential lives, shut away in cheap hotels, boarding homes, or "family care" facilities. (For details, see Baxter and Hopper 1980.) Recent studies indicate that the most significant factors in successful reintegration of such people have to do with the quality of one's surroundings and the nature of social ties to others (Bromet 1979; Goldstein & Barrow 1980) -- and not the sophistication of the service package delivered or the degree of persisting symptomatology. Given the deplorable conditions under which many former patients live, and the ways in which a poor environment can afflict a disordered mind, it is not surprising that they constitute a population peculiarly sensitive to disruptions in their daily routine.

Diminishing availability of low-cost housing: The overall vacancy for rental housing in New York City is currently estimated at 1% (with 5% considered optimal). Nearly 9% of the total rental stock is in rem (transferred to the city for failure to pay taxes), and an additional 31% is "at risk" of becoming so (tax payments three or more quarters in arrears). Between 1976 and 1979 median income crept up by only 7% while rents increased by 23.8%, and the cost of living rose by 19.8%. More than half the households now pay a quarter or more of their gross income on rent and utilities. The situation of low-cost housing is, predictably, even worse. Fully 16% of all vacant units, and a much higher proportion of those that are low-rent units, are "dilapidated" (Marcuse 1979; Department of Housing Preservation and Development 1979). A city tax abatement program (J-51) exempts developers who convert low-cost hotels into upper income dwellings from paying city property taxes for up to twenty years. There is no such incentive for upgrading the conditions in low-income residences. SRO hotels are currently being transformed at a rate which will ensure their extinction by 1984 (Crisis Intervention Services, 1980). All this comes at a time when the fiscal crisis of the state is especially acute (O'Connor 1975), with the resultant belt-tightening policies affecting the poor and near-poor with special hardship.

Persisting unemployment: The official unemployment rate in New York City currently stands at 8.8% (New York Times 2/7/81). This figure does not include those not considered to be part of the labor force; only those actively seeking employment are counted. A growing body of epidemiological literature indicates that loss of a job entails stress far beyond the mere loss of income. There is considerable evidence that unemployment causes severe social dislocations, disrupts personal support networks, and is a source of great personal distress (Brenner 1979). All of these, in turn, are registered in increased rates of sickness and death. A number of studies suggest that alcoholism is a common consequence of job-loss (Brenner 1975; Pearlin and Radabaugh 1976), and while the number of men being "driven to drink" by lay-offs is nowhere accurately recorded, that number confidently can be said to be rising. Of more immediate concern are the men who have lost jobs, exhausted their unemployment insurance benefits in a futile search for new work, and now live on the dole, clients of the Municipal Shelter.

The effects of the above developments, in our judgement, are three:

> an increase in the numbers of people whose ability to cope with destabilizing events has been strained and probably weakened by one or several dislocations in their personal lives;
>
> a greater likelihood that such vulnerable populations will encounter further stress, the effect of which will be to further disrupt their normal living arrangements;
>
> a significant reduction in the store of resources -- housing especially -- that had been available to people in sorely straitened circumstances.

The net effect of these developments is a growing marginalization of significant segments of the urban population and, concurrently, a diminishing capacity on the part of both private and public sectors to accommodate them.

Precipitant Situations

The immediate event which precipitates homelessness may be any of several kinds, ranging from the seemingly trivial to the manifestly disastrous. In almost every case, however, exile to the streets was accompanied by a sense of having been pushed to one's limit and having nowhere else to turn.

Eviction or the threat of it: Elderly and/or disabled tenants are easy marks for eviction. Some have been forced out en masse by owners eager to empty their hotels in readiness for conversion to higher income housing.

> Continental SRO: The managers contribute to the hostile behavior of residents by harrassing and threatening to throw residents out. One resident was screamed at and told to leave. He did and didn't come back for weeks. Residents fear leaving their room thinking it will be given to someone else. (9/6/79)
>
> Human Resources Administration: Interviewed an official well-versed in recent history and current situation of SROs. In one hotel the residents held a rent strike. The landlord burned down the building. At another, the developers walked in with sawed-off shotguns and ordered everyone out. They also used dogs to threaten people in the early morning hours. Some places have completely emptied over the weekend. At the most, a resident gets $25 to find someplace else to live. (9/11/79)

Conditions in prior residence: SRO hotels are generally poor settings for disabled adults, and yet they house more ex-mental patients in New York City than any other type of residence. Managers refuse to repair the plumbing, broken locks or falling plaster, or to provide heat or hot water while they continue to raise rents to what the market will bear. Tenants who object to these conditions get the proverbial: "If you don't like it, you can leave." Some do leave, preferring to take their chances elsewhere.

> Private Shelter: Judy was at the Continental for a month before a man punched in the locked bathroom door in the hallway, hit her and took her money. The manager caught the man but did not call the police. She since returned for her mail and noticed that the bathroom door still has not been fixed. She has remained at this shelter for fear of returning to the Continental or any other SRO. (4/17/80)
>
> Penn Station: The welfare department referred Jane to a hotel on the Upper West Side. She left, even with a week's rent paid in advance, because she couldn't bear the filth, the strange noises and people running down the hallways all through the night. She said, "I decided no place is better than that place," and went at first to sleep in the train station sitting up. She distrusts any referrals from the welfare department, and is awaiting a job so that she can secure a decent place to live on her own, preferably outside the city. In the meantime, she has found a cardboard box in which to sleep, located in an alleyway along with 10 to 15 others. (6/24/80)
>
> Columbus Circle: Joseph is a 92-year-old man currently living on the streets. I met him around midnight tonight, sitting on the plaza of the Gulf and Western Building. He sleeps in the park in the daytime, stays up nights. It's safer that way, he adds. He gets SSI, but his money ran out earlier than expected this month (as it has an unerring tendency to do). He had been staying at an "old men's home" at 96th and Lex, after briefly being hospitalized owing to a fall on a subway train (which left him stooped, with a pronounced limp). He left the home because of the way he was treated there: "You misbehave,

> they tie you to a chair. They take all your money, except $14 a month for tobacco." He then moved to the Salvation Army House on the Bowery, but soon left because the meals cost too much. Now stays in a hotel when he can, on the streets otherwise. Survives on his monthly check, handouts, and loans from friends (to whom he is in a large amount of debt). He plans, on receiving his next check, to head for a "nice hotel" (doesn't remember the name) on Grand Street -- surely a flop: it charges only $3 a night. Made a point of telling me where to look for him on the 3rd of the month so he could pay back the loan. (7/21/80)

Rent increases alone may be enough to drive those on subsistence level, fixed incomes to the streets:

> Penn Station: Two elderly sisters dressed in identical, filthy trenchcoats used to live in a hotel for women around the corner that provided breakfast and supper. "The rents were reasonable in 1941, but I don't know what it would be today." Later they shared a one-room apartment until about four years ago when a rent increase sent them to the train station to live. (6/2/80)
>
> Subway entrance: An impeccably dressed, small-framed woman in her late sixties stood quietly in the entranceway at 2 a.m. with her hands folded, because she "had no place to go nights." She said that she had had such bad luck and that with rents so high, she couldn't afford both a place to stay and food to eat. She picks up a social security check at the bank every month but it is barely enough to get by on. She added, "It's disgraceful that in such a rich country as this, so many people stand in doorways all night. It must be mismanagement of funds or corruption or something." (1/24/80)

It is not always clear how much of the reputed level of difficulty is real and how much is the product of faulty perception or troubled minds:

> Horace Greeley Square: Laura said she used to live in a hotel nearby. Apparently ran into lots of varied problems there. Complained of residents who were "really harrassers," elevator doors "with the habit of closing on people," and assorted, if mysterious, assaults on her person. "That hotel has a spirit of its own, if you know what I mean" -- and it was clear she felt it to be a menacing one. (7/16/80)
>
> 14th Street: "They don't trust me in the hotel. . . I stay on the streets because I want to, but that's only partly the reason. See, I couldn't trust anybody in an apartment, not after what they done to me. . . A couple of them got a group of machine guns to take me to another country in another hotel. They raped me there and killed my children. Two atheists did this." (Rousseau, pp.10, 13)

Once housing, however shabby, is lost, it may prove very difficult to recover. Given the demand for low-cost housing, managers are free to discriminate against prospective tenants, who, because of their physical appearance, strange mannerisms or odor, are "undesirable."

> Coffee Pot: "Discrimination against women is especially strong. If you're young, they think you're a prostitute; if you're elderly, they worry about lice, leg ulcers, incontinence and screaming in the middle of the night." (Interview with Reverend Meadows, 1/25/80)
>
> Aberdeen SRO: The new managers of the hotel presented the on-site service staff with a list of the most unsightly and troublesome tenants who "had to go" because they were hurting the hotel's prospects for attracting a more desirable and higher-paying clientele by standing in the lobby and in front of the hotel. Once the listed are hospitalized, the hotel will not accept them back. (5/13/80)
>
> Aberdeen SRO: Albert usually can be found in psychiatric hospitals at the end of each month after his SSI allotment has run out. Generally, he arranges his discharge or simply walks away from the hospital on the first of the month to pick up

> his check and pay his rent. However, the last time the management refused to take him back over an argument and he was forced to go to a Salvation Army Mission on the Bowery. (8/11/80)

Failure of aftercare provisions: None of the places to which mental patients are discharged appear to be especially well-monitored, with the possible exception of the few with on-site programs. (And even here assistance is limited to providing "services" and "activities," often with little effect on the actual quality of the surroundings.) Severe negligence is especially disturbing in those residences -- "adult homes"* and "foster care" sites especially -- which receive the more disabled ex-patients.

> George Washington Bus Terminal: The foster home where Anna was placed after her husband died continues to get her SSI checks while she lives in the bus terminal. She never received any of the money nor any food while she stayed there, so, in anger, she left. "It's not right that they take all my money. It's my money, you know. The children stole all my things -- my wedding ring, a pretty glass bottle, my clothes, everything." The social worker from the welfare office used to come by and see how things were going, but he hadn't been there for a very long time. (4/7/80)
>
> Eileen left the adult home she had been placed in while on a group trip with the other residents. She lost the group, "Well, the party got ahead of me. I was dizzy for a minute; I turned around and they were gone." She never went back but

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*A sober charting of the practices common in adult homes may be found in "Private Proprietary Homes for Adults," a report prepared by Charles J. Hynes, Deputy Attorney General, New York, March 31, 1979.

> clearly it was no great loss to her: "I didn't sleep the whole time I was in there. I lost my independence and what marriages there were. . . It's been a year and a half now since I've been living outside on the street." (Rousseau, p. 70)

In some cases, the wisdom of the discharge itself is questionable:

> Met a homeless man walking around the Bowery. He didn't seem to hear well at all, and made no response to my questions or offers of food and coffee. He only took some change once I showed it to him. He could speak clearly, however, and did so not more than six inches from my face and holding onto the sleeve of my coat. He reported having just been released from a hospital that morning for treatment of arthritis and a "bad heart". (He intended to go to the Shelter that night for a flophouse voucher.) That is all I was able to get of his story as he went on and on about having gone into a restaurant for liver smothered in onions and the bill of $6.00. It was very cold and I kept interjecting offers of coffee inside somewhere, but he didn't seem to hear me. (12/28/79)

In others, necessary intervention, which might have saved the arrangement, apparently was never provided:

> Men's Shelter: Emmet is back on the street again. He had been hospitalized a few months back, but was released sometime in late May (at least that's what he told the psychiatrist here). He had been living in an SRO uptown, but left after his SSI check failed to arrive on time. Couldn't get it together to go to the welfare office and see what the trouble was. Apparently, no one is following his case outside the hospital. He was told by the clerk here that he was barred from all the hotels because of his record of bad behavior in the past; can't go to Keener Bldg. either because at some point he tangled with a guard there. In effect, he has nowhere to go but the streets. (7/15/80)

Some ex-patients go to great lengths to find a place to live that doesn't remind them of the hospital they just left. Ann-Marie Rousseau recorded one woman's odyssey:

> "It's practically impossible for me to get out of this situation, because the only other choice I have is spending the whole year with a bunch of mental patients for $7.00 a week and that's it. There ain't really nothing for me -- just institutions." Mary, now 36 years old, was in a hospital the first time for three to four months until they discharged her to a nursing home, a common aftercare placement for mental patients in Illinois. From there she went to a boarding house, to two other hospitals and to San Francisco. There she was found by the police and referred to a Catholic agency which sent her back to the home in Illinois. Then she cashed her SSI check and came to New York City. She sums her life up: "When they put you in an institution they practically destroy your life completely. Ain't done nothing. Ain't been nowhere. Course I've done a few things, but if I have to spend all my life in institutions, well, I won't be putting nothing into life. I won't be getting nothing out of life." (Rousseau, p. 28)

Withdrawal of familial supports: Women who have been abandoned, divorced or abused by husbands or male friends, disowned by parents or children, and who have relied solely on these people for support, have nothing to fall back upon. Some families cannot be located, or once found, will not or cannot support a dependent and often disabled member:

> George Washington Bus Terminal: The woman hadn't seen her son in quite a long time. He used to be in a group home somewhere in New York, but she doesn't know where he is now. She responded to my offer to take her to the welfare office, "No, you shouldn't have to do that. I've got my family to take care of me." It turns out her family is a mother in a nursing home in New

> Jersey. She had her telephone number a few months back but had lost it. She didn't want to call her mother anyway because, "she might worry too much about me." (4/11/80)
>
> George Washington Bus Terminal: Cynthia, a strikingly attractive woman of about forty years, has been sleeping in the uptown bus terminal between police rounds and (when she is thrown out) in doorways around the area, for at least a year. She describes it as being "in transition between the place I used to live in Long Island with my boyfriend and some other place." (4/13/80)
>
> Penn Station: Ran into Jack -- another elderly pensioner who spends midday uptown, while dwelling at the Palace on the Bowery. Former odd-jobber and construction superintendent. Collects social security and V.A. benefits. Still not enough to live anywhere but the Bowery, he says. Has a son and a daughter, both lawyers (one in D.C., the other in Waterbury, Conn.) and a sister in Greenwich. Had a stroke 10 years ago -- the last time he saw his family. They don't want anything to do with him. His wife (a school teacher) left him long ago because of his drinking and frequent trips to the track. (2/18/80)
>
> Tunnels: Dave's been staying in the tunnels off and on for several years now. Also frequents the Holy Name Center, but doesn't like to stay on the Bowery because "they all drink there." Brother and sister still living -- the former just across the river in N.J. -- but had some "family problems" about 10 years ago and hasn't spoken to his brother for 8 years. He is hesitant to call either one because "they don't want anything to do with me. . ." (12/16/80)

Some, with friends or family that would take them in, resist the idea of imposing upon or burdening others.

> Grand Central: "My friend has asked me to move in with her, but I will never do that. She has her own life to live. I just can't stay with her all the time. She has a family that comes to visit her and I feel so badly when I'm there, even though they are perfectly nice to me. I just can't be with someone else's family." (1/24/80)

Loss of income: For a great majority, the little money they had just ran out. In some cases, a job was lost:

> Penn Station: As the rainstorm began, an elderly black woman carrying three bags, was sobbing and wincing each time she took a step on her extremely swollen leg, as she very slowly made her way to the overhang. Long ago, she had come to the United States from the West Indies at age 19. For the past 9 years she had worked for a couple as a live-in domestic on the East Side. The lady of the house recently became ill and was placed in a nursing home and they have told her they can no longer afford to pay her because of hospital costs and doctor's fees. She still hopes to work for them a few hours every other week when her leg gets better. (6/3/80)

For others, welfare or SSI checks were stolen or, typically for unknown reasons, stopped altogether. Or else, they didn't arrive on the first of the month and the landlord wouldn't wait. The process of applying for income maintenance programs and undergoing the periodic reviews is so forbidding that only the most clever, assertive and persistent can negotiate it on their own. Many refuse, or are incapable of, going through the process:

> "Home relief don't give me a check. . . I made four applications and he told me this, 'Go up to the fifth floor and you have to fill out another application.' So when I heard that I walked out because there are people that go in the same day and get the check the same day. Every check comes out of that floor but he was trying to give me some story. They like to make a fool out of you, so I walked out." (Rousseau, p. 9)

In other cases, the conditions of their prior residence made it impossible to hold onto the money once received.

> Private shelter: A Chinese woman in her early seventies, with no family or friends nearby, had lived alone in an apartment until a gang of youths began stalking her at the beginning of each month for her social security check. Eventually they took everything she owned -- her identification cards, address book of distant friends, purse and valuables. She was found by the police wandering the street and taken to a shelter. She speaks in a whisper or writes messages on scraps of paper for fear of being overheard by "bad people" like those who destroyed her life. (4/17/80)

Although many related these types of precipitating events or crises, on occasion we found that despite whatever initial "kick" may have occurred, it was only the first in a long line of choices and circumstances which led an individual into a homeless way of life. Such people may be said to drift gradually -- rather than be catapulted suddenly -- into life on the streets, which was also the common finding of earlier chroniclers of skid row. Often, they found men with longstanding and recalcitrant problems with alcohol, the consequences of which (if not the genesis) were obvious; or, they encountered men whose lifelong history had been one of social marginality. Such men usually left home at an early age, worked at odd jobs or seasonal labor, drew unemployment or relief benefits when eligible, never married and claimed few longterm friends, and, seemingly, were reconciled to a way of life as much chosen as it was conferred (Bahr 1973). Some of both these types of individuals still can be found in the taverns of the Bowery, in the flophouses, in abandoned buildings, or in the more arcane havens of the homeless.

As early as the mid-sixties, however, students of skid row culture noticed a marked diminution in the ranks of both these types of men. This trend has continued up to the present, and accounted for what was thought to be an overall decrease in the numbers of homeless in urban centers. Two new populations began to appear at the end of the sixties which significantly altered this picture (Rooney 1970).

The most disturbing feature of the new Bowery is the number of men obviously disturbed and often young now residing there.

> Men's Shelter: Often see a young man, Alvin, rummaging through the garbage lining the street in front of the Shelter. One of the "psychos" the staff has no idea of what to do about. All agree he should be hospitalized. None of the hotels will accept him. He won't go to the Keener Building. Sleeps in the doorway until they chase him out, only to come back later. Or catches brief naps on the bathroom floor. Sometimes eats at the Shelter, but mostly subsists on what he finds in the garbage. Tonight, a guard interrupted a conversation I was having with the Shelter's supervisor to report that he had found Alvin "eating the flush out of the toilet." (2/26/80)

> Men's Shelter: With one staff member, met and talked with Phillip, a 25-year old man here since May 1977, at which time according to his records, he was being treated with Thorazine at a clinic in Brooklyn "to relieve nervous tensions." Plans at that time to help him find his own residence apparently fell through. At some point -- he isn't clear on this, nor is his record -- he was hospitalized. Says he came here from the hospital. A slight, obviously "distracted" young man. Jittery, having some difficulty talking. Appears to be well acquainted with Mental Status exams. When we asked the standard questions (who is the president, what is the date, etc.), he first says he doesn't know, pauses, then -- if you wait for it -- blurts out the correct answer. Spends his days "just hanging around," sleeps either in the hotels or on the streets, eats in the

> Shelter. When asked if he in fact sees a social worker once a month, he says "yes," then adds, "See?" and dropping his pants he examines his genitals. Joe (the staff member) gently advises him to pull up his trousers, he does so and skips off to play a round of hopscotch by himself. (7/30/80)

Others evincing clear mental difficulties were apparently shunted to the city shelter in lieu of hospitalization, casualties of tightened admitting criteria at municipal and state facilities*:

> Keener Building: Long interview with Isaac, a man in his early thirties who came to the states from Nigeria in 1964. Worked for the government, and then for a bank, he says. Wearing only a tattered pair of trousers. Recited several times the story of his arrival there: "I came here from St. Vincent's Hospital. I was told I had a ruptured appendix."
> (How did you get to St. Vincent's?)
> "I don't know; I haven't the slightest idea. I was told I was crying in my apartment in the night, or something like that, and my neighbor called the police, who forced the door down, and found me on the floor. Then they took me down to the hospital . . . They saved my life. . . Then the department of social services got involved when I was in the hospital. They didn't know who I am, who I belong to. . . so they tried to find out. . . And after I had the operation, they brought me here, hoping to find a place where I could stay, because they said the place I was staying was taken. . . And I really can't say, because I really don't know what actually happened to me."
> (How long ago was that?)
> "I don't know, I have no memory of that." (8/12/80)

Aside from the ex-mental patients and others in apparent need of psychiatric care, the new arrivals of this period are often young, jobless, minority men,* given to using more than one type of illegal drug. Today, their numbers are the most striking feature of the line that forms daily at the Men's Shelter for food and lodging -- a phenomenon that baffles and worries older staff there. Their origins remain obscure, their presence suspect (especially since many are able-bodied, without obvious defects) and their reputation fearsome (often they are thought by veteran staff to prey on older, defenseless men and, in particular, elderly, white men appear to find them threatening). Contrary to previous depictions of skid row lifestyles, they appear to be more group-oriented, even clique-ish; almost uniformly, they will deny that anything like a lifelong habit is being formed: *

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*A report from the New York City Comptroller's Office (9/21/79) estimated that since 1968 new admissions to state psychiatric facilities dropped by more than 8,000 per year.

> Men's Shelter: Met Leroy while trying to find out what had happened to the man who was found unconscious and bleeding in the street just as I arrived tonight. Leroy was a good friend of the man, he said (though he knew only his nickname), so we followed the ambulance to Bellevue, as soon as Leroy had finished the quart of beer he was working on. Leroy and his twin brother have both been down on the Bowery for a year now. They are well-known, work intermittently and drink regularly. He's a muscular young man in his late twenties, a strong figure with quick wit and gift for yarn-spinning. He and two others had been arrested some time ago on a rape charge, which he explained by saying, "It was all a mistake. We were just fooling around -- and she was a whore anyway." After which, apparently, his mother threw him and his brother out. Sees his tenure on the Bowery as "strictly temporary. . . I don't belong here," and doesn't expect to be there long.
> (late March 1980)

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*The median age of the Men's Shelter clients was over 50 in 1968; by 1978 it had dropped to 41 years for the total population and to 36 years for the new clients. At the same time the proportion of non-white clients increased dramatically. In 1970, 51.1% were white and 35.9% were black; information is not available for the remaining men. By 1976, the proportions had changed to 38.7% white and 48.9% black. The trend has continued with the latest figures available (1979) showing 24% white, 62.6% black and 11% hispanic.

Not only mental patients, but ex-addicts and recovering alcoholics may experience severe re-entry difficulties.* Without proper follow-up, they too may "fall between the cracks" of existing programs:

> Keener Building: Spoke with John, a black 35 year-old man, native New Yorker. Articulate, weary, still angry. Hearing his story, it was not difficult to see why: "I was trying to get welfare, you know, and they tell me in Welfare that I need a birth certificate, a social security card, and I got to bring in papers stating where I've been for the last year, and. . . uh, like I'm down and out. . . I can't go to my family; was on drugs at one time, and they got a thing about drugs, so I can't get no help from them. I'm not using drugs now. I went through a program, and I've been drug-free for a while now."
> (What happened after you got out of the program?)
> "That's when I went to the welfare center. They told me that I had to go to the Men's Shelter to get the proper identification. So I've been going to the Shelter for the last eighteen months. . . I just started coming here the last two weeks. Till then I was staying at the Kenton Hotel (a flophouse). I haven't been able to get welfare since, I haven't been able to get nothing. . . I don't understand: I went through the program, plus I had an alcoholic problem and I was getting alcoholic treatment, too, and I still can't get no welfare. I don't understand that. That makes a man. . . you know, want to do something illegal."
> (Did you have a social worker at the Shelter?)
> "Yeah, I had a social worker, he was trying to process my case. But he kept on talking about how they needed proof. . . my age, where I was born, you know."
> (And they couldn't get that? From the hospital or the birth certificate office?)
> "I don't even know if they tried."
> (And they never told you how to do it on your own?)
> "No." (8/12/80)

The unraveling of total devastation can rarely be traced to a single precipitating event or crisis. The co-animating forces of poverty and mental and physical disability can propel their victims from one calamity to another, taking a cumulative toll. Welfare, mental health services and family support are often encountered somewhere along the route downward, but are insufficient, ill-equipped or unwilling to prevent the fall or to help in the recovery once it has occurred. For those who were spared mental illness before they became homeless, the daily stresses of searching for a safe place to sleep and food to eat, and of trying to fend off predators can be mentally exhausting and disorienting. Once their mental capacities begin to crumple under the strain, their existence becomes even more precarious. For now they are shunned by other homeless people as well, by those, at any rate, whose minds, if little else, have remained intact.

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*As do, apparently, the young veterans of the Vietnam war. The Brooklyn Veterans Outreach Center estimates that 16% of its caseload of 500 are homeless.

PATTERNS OF SURVIVAL

> "The most important thing in every man's life is shelter. Once you have shelter, then you are able to get yourself together, then you are able to develop the idea of how you can get yourself out of the trouble you are in." (Isaac, Keener Building, August 1980)

In the following section, we will describe various tactics of survival that are practiced by the homeless. We do so in an effort to recapture some of the diversity of their lives, a diversity that is often collapsed into a common denominator of scrounging in popular accounts of their plight. We view patterns of survival as more or less successful solutions to problems which, in turn, are composed of three parts: needs, resources and opportunities. Needs, as we understand them, include shelter, food, security, privacy, companionship, medical attention, hygiene and work or other meaningful activity. Personal Resources include income, level and kinds of knowledge (ranging from the ability to read and write to general street savvy), problem-solving skills (of a variety of sorts), ability to relate socially, physical appearance, and the degree and obviousness of mental and/or physical handicaps. Opportunities encompass a range of environmental resources - including employment, lodging, friends or family, food and clothing distribution centers, medical care, and bathing, laundry and storage facilities, and their attendant costs.

In the discussion which follows, it should be borne in mind that the classification schemes we introduce have to do with ways and means of surviving. They are not intended as typologies of individuals. With Leach and Wing, we are interested in classifying problems, but do not suppose that in doing so we are also classifying persons (Leach and Wing 1980:2). It is practices, not personalities, which concern us. At the same time, it should be noted that tactics of survival are not easily compartmentalized, nor should they be understood as constant or even discrete activities.

We have organized our discussion around the dominant theme of shelter. This is because shelter is such a basic provision that, once obtained, a number of other needs can often be attended to as well, usually with the assistance of the shelter's agencies or staff.

Public Shelters

Until recently, city-operated shelters on the Lower East Side represented the only public measure to house the homeless. In response to the increasing visibility of the homeless, mounting attention of the media and the law suit mentioned earlier, the city has recently come forth with a new shelter for men as well as with a proposal to fund two "drop-in centers." This latter move follows intensive lobbying on behalf of advocates for the homeless, the formation of a special task force and a year of planning and discussion. One of the proposed centers is encountering zoning restrictions and neighborhood resistance that may well prevent its opening on time. Regardless, neither will offer nighttime accomodations -- a perplexing omission which sidesteps the most obvious and acute need of the homeless.

The Men's Shelter

Applicants to the City Shelter Care Center for Men -- commonly known as the Men's Shelter or "Muni" -- are processed at the shelter on East Third Street. Until 1964, the building actually served as a shelter, providing beds for upwards of 600 men, but since then it has contracted out all but a few beds (used as an infirmary) to the flophouses (or "hotels") on the Bowery; scores of men regularly spent the night in the main lobby of the first floor until it was closed in January 1980. The kitchen in the basement still serves three meals a day to some 1500 men. Case workers are assigned to all new applicants within a week of their arrival and are occasionally successful in securing benefits to which a client is entitled.* A recently assigned Community Support System team is supposed to assist those eligible (i.e., those with extensive in-patient histories) in finding alternative residences. To date, the success of these teams appears to be rather modest.

Once processed by the workers in the 5" x 8" room (so-named for the size of the cards on which client information is entered), a man receives meal and hotel vouchers. Interrogation at the desk is typically perfunctory, occasionally harsh, and may even (though this is rare) be disarmingly kind. Men have been known to be rejected because they are unable to convince the intake worker they are indeed "destitute and needy." For the most part, however, entry is assured by virtue of one's presence: it is taken for granted that even a swindler, if he is willing to undergo the humiliation of the shelter, counts as being "down and out."

As hotel rooms are also available to customers off the street, it was possible to get a first-hand view of at least part of the contemporary skid row residential scene:

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*There appears to be a fair number of men who are not receiving benefits they could claim. A recent (12/28/79) survey of over 500 shelter clients showed that while over 1/3 were veterans, only about 1/2 of those eligible were drawing pensions. Approximately 1/5 of those sampled were currently receiving assistance from other agencies -- over half from SSI. Those who do receive checks have room and board deducted from them at a rate of $13 a day.

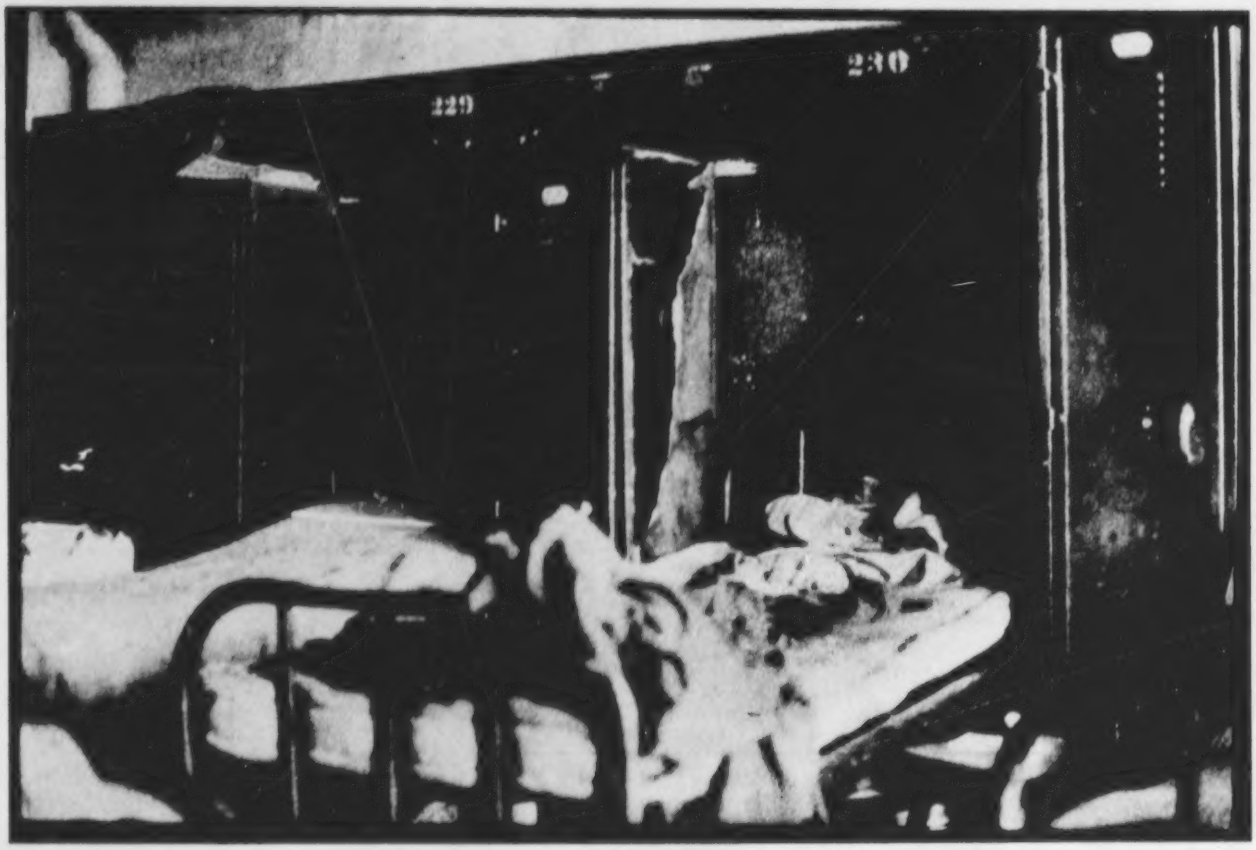
> Palace Hotel: I got the last room available, for $3.33. A 5' x 7' cubicle with locker. Fairly clean sheets (to my surprise), no lice and only a few roaches. Chicken-wire ceiling, covered with cloth. Thin wooden walls -- looks like wainscotting, whole place a tinder-box. Situated on the floor near the desk. No dormitory here. Perhaps two dozen rooms on this side of the floor. All singles.
>
> Stayed in the T.V. room till 11:00. Maybe 150 men there, watching The Towering Inferno. Cigarettes a scarce item, a number of men hawking them at 10¢ apiece. Others passing out one or two every time they themselves light up. Some decidedly disturbed, carrying on highly animated conversations with themselves (the guy next to me, in what sounded like Ukranian). Ignored by others. A fair amount of open drinking is tolerated -- as arguments and fights are not. Even a brief outburst, if loud, is met by an order to hush up from the impressively muscled desk clerk. In general, good spirits pervade the room. No real fights or unpleasantness. A thoroughly mixed crew: one dashingly attired artiste (complete with beret, beige wool coat with black velvet lapels, black turtleneck) sketching on a large pad, carried in a portfolio; good number of young guys in their twenties; some old, weatherbeaten faces as well. Most dressed for the season fairly decently. No apparent wounds or debilities -- except again for the severely disturbed men: poorly dressed, unable to sit still through the film, gesturing in repetitive patterns, hair matted, grubbing butts off the floor. The shape the shoes are in is nearly always a dead giveaway.
>
> As the men prepare for bed, it is clear that many on this floor are regulars. The tiny rooms are filled with possessions (radios and mementoes), their walls lined with pictures in cheap frames, clothes hung from makeshift closet rods. These are not the ticket men. A friendly, bunkhouse repartee peppers the air as men retire; an oddly unfrightening place, from this safe vantage. (2/18/80)

Conditions for the "ticket-men" -- especially the older ones -- are less benign:

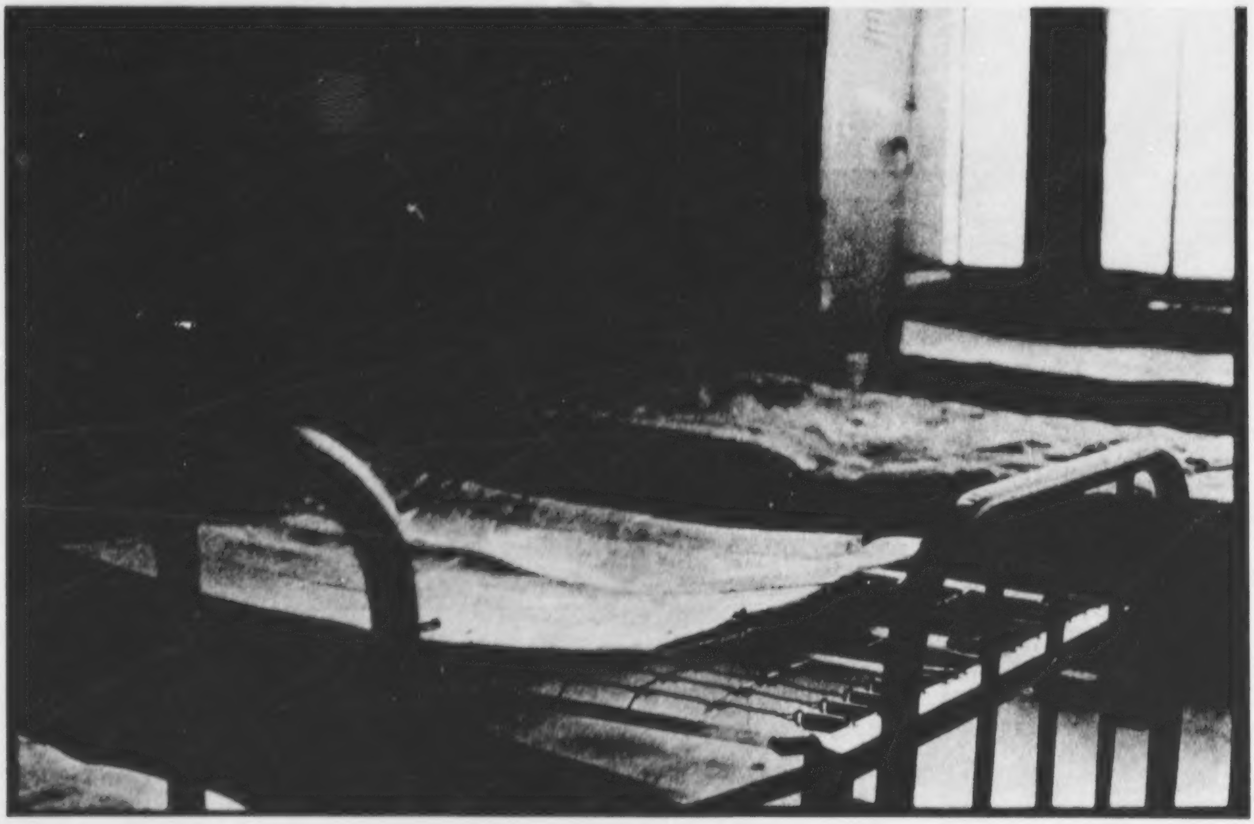
Palace Hotel: The dormitories occupy two floors of the Palace. Floors appear to be segregated racially, as far as is possible. Approximately 120 men are crammed into a room perhaps 80 feet by 40 feet; another twenty cubicles are built into the north wall. Beds are arranged in four long rows, each stretching the length of the room. Each bed is separated from the adjacent one by a metal locker. Many of the doors to the lockers (my own included) were sprung, making the key paying customers receive at the desk useless. A few of the beds have no mattresses, the bare metal rack covered with makeshift padding (an old rug, a sheet of corrugated cardboard) or left exposed. The mattresses are, without exception, black with dirt and grime, pockmarked with the burns of innumerable cigarettes, and torn so that the stuffing protrudes. Perhaps a dozen of the beds have sheets or blankets; inquiry at the desk revealed that none were available. It was too dark to see whether the bedding was louse-infested. Four lightbulbs provide the only illumination in the room. It is early evening. At this time, most men are either at dinner or downstairs in the T.V. room; those in the dormitory are mostly elderly. It is quiet. Men lie in beds, smoking and staring at the ceiling; a few manage some privacy by pulling covers or coats over their heads. A racking cough, the sound of incessant scratching, someone singing softly to himself, sporadic conversation -- apart from these, the room is still. (10/14/80)

Keener Building: Interview with John: "I was in the Kenton, 333 Bowery. The Shelter sends you to a hotel. At the hotel, you got maybe 200 guys sleeping in the dormitory. They don't give you no clean sheets; they got all kinds of lice on them, crabs on them. They don't give no type of stuff to take care of your personal hygiene. They don't give none of this. Plus they have ex-mental patients down there, they babble and talk to themselves -- they don't give them no type of assistance. Plus they have security guards down there, hitting people on the head with sticks. And this is the Department of Social Services. . . they got to know this is happening. (8/12/80)

Second-floor dormitory, Palace Hotel (October 1980), where up to 450 men are referred each night by the Men's Shelter.



Kenton Hotel (October 1980)



Palace Hotel (October 1980)

> Penn Station: Ira spends his days in Grand Central and Penn Station because he's afraid to stay at the Palace. Been mugged twice there recently: once on his way up the stairs; once while sleeping. On neither occasion did he have anything worth taking. Robberies are frequent there, he reports. Regularly wakes up in the middle of the night, sweating with fear, terrified of getting into trouble or getting hurt. Often witnesses guys slitting the trousers of sleeping men for whatever the contents may be. (6/18/80)

In some hotels, privileges accorded the ticket men are considerably less than those accorded paying customers -- or those who remember to slip the desk clerk a little something from time to time. The T.V. room, for example, may be closed to all but paying guests. And in all hotels, the men on vouchers must be out by 7 or 8 a.m. and are not allowed back until the afternoon.

The alternative to the hotels is the Keener Building, opened this past winter as an emergency shelter as a result of the class action suit filed on behalf of clients of the Men's Shelter. Located on Ward's Island, Keener is physically isolated, a good distance from any part of the City, and can be reached only by combining bus and subway -- or subway and a long walk over the "Night Train Express" bridge adjoining the Island and East Harlem. It occupies a building abandoned by Manhattan State Psychiatric Center and shares its quarters with a small colony of artists, some of whom run classes for the men in exchange for the use of work studios. This anomalous feature aside, the plan is a paragon of institutional thrift: a skeletal staff, rudimentary bedding (light mattresses on metal frames), and walls innocent of any ornament but grafitti. The one concession to relief of tedium is a new mess-hall, open only during mealtimes. Few of the T.V.'s in the common rooms appear to work, newspapers are days or weeks old by the time residents get them, and magazines are nowhere to be seen. Men lounge around in various stages of undress, in contact with an assortment of realities; some of them are former hospital patients. By a stroke of grim irony, these ex-patients have come full circle back to the institution which had originally discharged them -- this time for shelter, not treatment. The latter proves difficult to secure: after a team of psychiatrists had determined that 16 clients were in need of immediate hospitalization, two weeks went by before most of them could be placed in State hospitals (a few disappeared), despite the fact that one of the largest is located a quarter of a mile away.

Though originally intended as a nighttime residence only -- a limited number of subway tokens are available daily for men wishing to go back to Manhattan and return that evening by a van from the Shelter on 3rd St. -- many of the men are too incapacitated to leave the Island with any frequency. They languish in nearly unbroken torpor, confined to the building throughout the day but for an occasional, supervised walk. They are inmates in all but name.

For most men we talked to, mention of the Shelter conjured up three things: easily acquired wine, lots of "sick people -- you know, psychos," and an ever-present threat of violence. It is the violence that is the strongest deterrent to men who once there vow never to return. Memories of violence are vivid, incidents are recounted from a seemingly endless store, and the dates are always recent. After a few hours there at night, it was not hard to see why:

> Men's Shelter: I arrive at 5:00 p.m. in time to witness an argument becoming a scuffle as two younger men wrestle an older man to the ground and begin to go through his pockets. The older man's efforts at fending off his assailants are rather feeble and ineffective. The noise quickly draws three cops from the Shelter, the entrance to which is maybe twenty feet away. On their arrival, the two younger men take off and the older man, bleeding from the lip, is helped into the Shelter. One cop, in apparent disgust, yells after the retreating pair: "You should have known he'd have nothing worth taking." What little the old man did have in his pockets lies strewn on the sidewalk: packets of sugar, some twine, a belt. The next man coming along carefully sifts through them.

Later, that same evening:

> Around 7:00 p.m. I helped a badly bruised man across the street, into the Shelter and tried to clean him up a bit while the sergeant on duty called for an ambulance. Call went out at 7:00, sergeant came out of the office to tell me: "it happens all the time. . . young guys rolling the old drunks. . . for fifty cents or whatever." As we wait for the ambulance, I get this story from Fred , a WWII veteran of 57, who has been around the Shelter since 1948: he believes (sticking for the rest of the evening to this account except when a fatigued "I don't know" momentarily substitutes) he was hit from behind and knocked to the pavement. Didn't see his assailant. Not sure whether he blacked out or not; doesn't think so. (Later adds that he was stepped on by the mugger and held to the ground while the guy went through his pockets -- but this sounds like embroidery.) Lay there for a few minutes or so -- blood had already caked on

> his head when I arrived. That he was mugged -- and didn't just fall, which the attendants at the ER at St. Vincent's were later to suspect -- is strongly suggested by the fact that his left trouser leg had been ripped at the pocket seam, exposing the white pajamas Fred had on underneath. It is unlikely that this happened very long ago, since the under-pair was remarkably clean, in contrast to the grubby, grime-stained pair of outer pants, at the point of the tear. Fred said that they'd taken a small suitcase, and then, searching his pockets, discovered that they'd lifted his identification cards (meal ticket and hotel voucher) as well. He didn't know where he'd stay that night -- and half-hoped, I suspect, that he'd be admitted at St. Vincent's. He wound up spending the night in the Big Room. (1/25/80)

As much as any place, the "Big Room" was cited as the scene of violence until its recent closure as the result of the lawsuit. The "Big Room" was where up to 250 men slept on the concrete floor or in plastic chairs after the Shelter had run out of vouchers for the flophouses. Once the "Big Room" was filled to capacity, the remaining men were turned back into the street. Inadequately patrolled, virtually ignored by staff during the hours midnight to 5:00 a.m., the "Big Room" was a virtual thieves' sanctuary, one only occasionally exposed to the public through the efforts of an intrepid reporter (e.g. Village Voice, 6/20/68).

Some men voice quite specific fears:

> Penn Station: Ira is still staying at the Palace Hotel. Spent winter and spring there. Though in his mid-50's, he looks older -- what with his grey hair, great white bushy beard and the slight palsy that afflicts his head and hands. Desperate for a shower and some privacy. Still, professes to be fearful of the "funny looks" he got the one time he

> showered at Holy Name Center. Felt the same discomfort while washing up, stripped to the waist, at the Palace. Associates it with race: "I don't know if you've noticed, but 95% of Negroes are queer. Y'know, always walking around with their hands on their crotch." (6/18/80)

For most men a more general fear is the rule, a low-grade apprehension that keeps them constant companion and intensifies as they get older. The "hawks" or "jackrollers" aren't stupid: older guys are more likely to be on pension or getting V.A. checks and are sure to put up less of a fight. This may account for the fact that so many older men long for the day when they can put together just enough extra money to move into one of the better hotels -- like the White House, which caters to an elderly clientele with the same complexion as its name.

In the minds of most men the staff are party to the general air of threat that pervades the Shelter. Relations between men and staff are perfunctory at best; more often, they are abrasive and, not infrequently, combative. The staff, it must be admitted, are in a peculiar bind, at once agents and victims of a singularly lowering set of circumstances. Conditions are harsh, the work demanding and thankless. More than a few suffer the demoralization that accompanies the knowledge that the problems they are expected to deal with run far deeper than their own puny efforts can reach. Complacent, uncaring, even cruel instances of staff behavior can always be cited; but most do care and are angry at the lack of official support for or understanding of their position.

The staff are almost all terrified of catching some dread disease from the clients and bringing it home to their families. Such fears are not groundless, though they tend to be exaggerated. The list of afflictions commonly found at the Shelter includes lice, TB, hepatitis, and a variety of respiratory ailments. Occasional eruptions of violence lead the staff to see the clients as uniformly unpredictable and dangerous. All have witnessed -- and more than a few have experienced -- a supposedly gentle wino going "berserk" and attacking a staff member or guard. One supervisor recounted how he had spent 6 months in bed after being beaten by a client. In the fall of 1980, a patrolman was blinded in one eye after a client threw lye in his face. Although isolated, such incidents exact a noticeable toll when combined with an already taxing work situation. Most of the staff on the floor conduct themselves defensively when in close contact with the men, maintaining distance and affecting the appearance of control by the use of sticks (to avoid touching), rough language, barked orders. Most hold younger clients in particular at least partially responsible for being there. Most are on the look out for chiselers and double-dippers -- clients already receiving welfare or other benefits and so technically ineligible for shelter.

> Men's Shelter: Even with the court case in process and observers present, relations between the staff and the men continue to be antagonistic. At 11:30 tonight, a general clean-up commences: all those men not able to give a clear and immediate answer to the question "Do you want to go to Keener?" are told to leave. Four of them are bodily ejected down the stairs and out into the streets -- two are noticeably drunk. (One of them promptly lets the

> air out of the tires of what he hopes to be a guard's car). It is a bitterly cold night to spend on the street. Most of the half dozen or so standing outside the Shelter hope to spend snatches of the night on the stairwell, warming themselves until once again kicked out. (2/18/80)

On occasion, the mixture of fear, frustration and resentment is combustible:

> Men's Shelter: As I start to leave, a ruckus breaks out in the Big Room. When the staff member at the top of the stairs had turned to talk to me as the men were being herded onto the bus, the eighth in line bolted for the bathroom in the Shelter. He was chased out by a staff member wielding a night stick (with which he had struck at least one other straggler to hurry him onto the van), but then ran into the Big Room. He was a large, fleshy young man, white, wearing a dirty sweater, loose pants, barefoot, and looking very frightened. When I got to the Big Room (along with a number of the cops), he was being pinned against the wall by two staff members, using a row of connected chairs as a sort of prod. The tall man with the nightstick was standing over him, yelling and threatening to use the stick. The young man crawling around the floor for cover, was crying: "Don't hit me, don't hit me." Things quieted down considerably as the sergeant arrived, persuaded the man with the stick to return to the front desk, and ordered other staff members to pick the man up. He was than walked to the front door. The cop standing next to me remarked: "He belongs in a hospital. He lives in the streets, eating from garbage cans, and sleeps in the bathroom (in the Shelter)." As I was leaving, the young man was tearing up pieces of paper and throwing them in the door to the Shelter. Whether he spent the night on the street or in the Shelter I do not know. He did not make the last bus for Ward's Island. (1/25/80)

> Men's Shelter: Related to me by a staff member: A little over a month ago, one of the clients was badly beaten by a staff member, on security rounds.

> The attack was, on this account, entirely unprovoked. The assailant was a staff member of some 8 years standing. No attempt was made to break it up by other staff or cops -- until blood began to pool around the beaten man's head, as the staff member smashed it repeatedly on the floor. The cops, it was noted in their defense, do not intervene unless called up to do so by one of the staff. No such call had been made. A whitewash report is logged in the record: noting only that an "altercation" had occurred, in which a staff member claimed that the client "took a swing at him and he retaliated." (5/26/80)

After a while, other less dramatic practices pass unnoticed, becoming ordinary, unobtrusive features of everyday life at the Men's Shelter. Clients are yelled at regularly in harsh and threatening tones, pushed and prodded with night sticks, and, not infrequently, bodily ejected for failure to observe some actual or ad hoc rule. Strikingly only to the newcomer, these are the expected, run-of-the-mill realities of an institutional routine.

> Bowery: Robert prefers to sleep in an abandoned building because "I don't want the aggravation of the cops or security guards at Keener Building. They treat you like boys there, and I'm not a boy, I'm a man." (5/15/80)
>
> Men's Shelter: After a while, Mark pulled me aside -- we had been observing the goings-on in the lobby -- and asked: "Do you really want to see how they treat the group down here?" When I nodded yes, he told me to go into the bathroom, where a man was cleaning up the floors. The man's shirt was stiff with dried blood from, it turned out, two stab wounds he had received the night before. Both wounds were open, though the bleeding had stopped. He was mopping up the floor at the staff's instruction and there is no way he could have received his assignment and gotten his mop and bucket out of the closet without having

> passed in full and close view of a number of them. Yet apparently no one noticed that he needed medical attention. (2/1/80)

Stories abound of certain staff members exacting sexual favors from younger clients, presumably in exchange for a promise of preferential treatment. This practice is apparently more widespread at the Keener Building, where security guards and "institutional aides" have, in effect, unsupervised run of the place.

> Keener Building: Interview with John, remarking on the lack of attention -- medical and psychiatric -- given to the more disabled clients there: "Guys walking up and down talkin' to themselves -- and all the guards do is be back there playing with the homosexuals. . . they give them more 'treatment' than they give this man here" (pointing to an obviously disturbed young man rocking on his bed). (8/12/80)

Privately, some of the staff will admit to being horrified at what goes on at the shelters. Occasionally, the admission will be public:

> Men's Shelter: One man sent to Keener that night was only reluctantly accepted. Came in at 9:45, escorted by a cop and showing some difficulty in walking. Turns out he has multiple sclerosis, resides at an upstate rehabilitation center and ran out of money while on a trip to New York. Now has no place to go and the center can't be contacted till tomorrow. The attendant at the front desk did his best to persuade the cop to lodge him elsewhere: "He can't stay here. He'll be taken advantage of -- physically, mentally, sexually -- any way they can." But he winds up staying. (2/8/80)

At times, the staff's concern appears as a certain solicitousness; on any number of occasions the male researcher was warned not to venture too far away from the small, well-patrolled lobby on the first floor, out of fear for his personal safety. The gameroom on the fifth floor was thought to be especially dangerous.

The Women's Shelter

The Shelter Care Center for Women, also operated by the Department of Social Services, has beds to accommodate women, both in Manhattan and in the recently established annex in Bushwick. It is generally filled to capacity; in the middle of summer (8/18/80), when one would expect the lowest census, there were only two beds available in Bushwick, and none in the Manhattan facility. Through self-referrals, the police, social service agencies, friends or family, the women arrive at the doors. During the period 1971-1977, the number of applications for admission rose dramatically each year from 872 to 3,355.* However, admissions are not made easily.

> I called posing as a social worker from Bellevue Emergency Room with a referral I described as having come from Maine, no psychiatric history or symptoms, but simply in need of a place to stay. The caseworker responded by saying, "You know we don't take any in-patient referrals. Psychos are a no-no here. . . call the state hospitals in Maine to see if she has run away and try to arrange to send her back. . . try to get a straight story from her, get names and addresses

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*These figures are a tally of admissions and may be inflated as they include readmissions that year.

> of friends and relatives. If you send her here, we'll be stuck with her for three or four months. . . Is she psychotic?" I assured him that she was not but he remained unconvinced and continued to discourage me from referring her there. (2/13/80)

The 1977 Annual Report shows that of the 3,355 women who sought admission to the Manhattan facility that year, only 935 were accepted; 72% of the women were considered ineligible or inappropriate for admission or else no vacancies were available. Of the 935 admitted, some were soon thereafter asked to leave for failure to comply with the regulations.

For those who are admitted and allowed to stay, the Women's Shelter serves a dire need.

> "I was living on the trains before I came here. The police made me get off the trains. They said I was a disturbance and told me to go to the Emergency Assistance Unit and then I came to the Shelter. I've been here before. This is my fourth time. Twice I ran out of money and twice my checks didn't show up at all. It seems like a continuous, perpetual thing. Evidently it's part of some project to see what happens when you don't have any money in the City of New York. . . This place here, the Women's Shelter, this is a humanity place." (Rousseau, p. 135)

Even so, given the scarcity of alternatives, the extent to which it meets the true need for shelter and the form in which it does so are matters of concern. The rules and regulations posted in the waiting area are hardly inviting: all clients must be in bed by 10 p.m.; must perform any housekeeping duties assigned by the attendants, purportedly to "help each client assume responsibility for self-care" (one such task is using the laundry room, although only the attendants may operate the machines); may not make or receive any telephone calls after 9 p.m.; must pay for room and board if on income assistance; must turn over whatever money they possess; must relinquish all prescription medication (any drugs are to be dispensed by the staff); must shower daily; and must submit to an examination by the staff doctor as well as a gynecological exam at the Social Hygiene Clinic within three days of admission. The admitting procedure also includes an extensive intake interview. All personal belongings are stored in a baggage room with the exception of small articles and some clothing. Clients who refuse to comply with the above rules or who cause a disturbance are not permitted to remain at the Shelter. Despite these procedures, many of the women there consider admission a privilege -- or, at least, better than nothing.

> Women's Shelter: I could easily overhear the intake interviews through the partition. One middle-aged, white woman claiming the stage name of Shirley Temple told a rather disjointed story about having thousands of dollars in banks but no bankbooks to withdraw the money, a husband for whom she insisted she had no address or telephone number and minutes later recalled both, numerous references and places of employment and several psychiatric hospitalizations. She was granted a bed in Bushwick, a subway token, and directions to get there and was profusely grateful: "You mean I can have a bed? Oh, wonderful! Thank you, thank you very, very much." (2/15/80)

> Women's Shelter: The black woman in her mid-thirties had been discharged from Beth Israel that morning. A social worker there had made arrangements for her to go to an adult home in Far Rockaway, but there would not be a room available for a few days. The caseworker agreed to give her a bed in the Bushwick annex. She pleaded that she be allowed to stay at the Women's

> Shelter as she was from Philadelphia, unfamiliar with the subways and afraid of the neighborhood. The caseworker then said, "If you don't want to go to Bushwick, then go back to Beth Israel." She responded, "But they won't admit me because they found out I had no coverage and discharged me. . . You have to understand, I've been institutionalized for most of my life, more than twenty years, and I can't make my way on the subways. I'm afraid, can't you see, I'm afraid." He offered her a subway token or the door. Sobbing, she took the token and asked for several repetitions of the directions to Bushwick. It is unclear why he insisted she go to the annex at 9 p.m. as there were beds available in the dormitories upstairs; I got one and others were empty. (2/15/80)

Once admitted, the physical structure and routine is strikingly like that of a mental hospital with custody, containment and recycling functions established. As in a mental hospital, all one's survival needs are met (shelter, food, clothing, etc.); and, similar to current policies in such institutions, "treatment" is geared toward finding placement elsewhere. Although the doors are not locked and women are free to leave when they choose, most have no place to go, precisely for the reasons they are there in the first place. The conditions are not abusive as they are in the Men's Shelter. But while all the necessities for maintaining personal hygiene are available, clothing is provided and a metal locker and clinical and social services are offered, the atmosphere is bleak and the regimen militaristic:

> Women's Shelter: All meals must be signed for in advance. Though the tables of four suggest sociability, an attendant directs women where to sit, filling the back first, refuses requests for seconds and quiets those that get out of line.

> Most make no conversation. They eat quickly and leave. A loudspeaker blares out the names of those who are to report to the office, who has a telephone call and when cigarettes are to be passed out in the lounge. Time is passed watching television and waiting until the next meal. No one is allowed to return to their bed during the day without medical permission, so some sleep sitting in chairs. Bed checks are made on the hour through the night. Beds must be made army-style, with corners and all wrinkles smoothed. (2/15/80)

The days pass by with periodic crises, arguments between women and staff and between women themselves, infractions of the regulations, with the police or ambulances summoned for those considered too disturbed or violent. Employment is not easily obtained, nor is it encouraged.

Occasionally, women are "placed" in more suitable -- or at least, longer term -- residences.

> Women's Shelter: Two women were approached by a caseworker who told them they were both going to be transferred to an adult home in Far Rockaway "close to the beach, so you can get a tan. You'll like it there." It was obviously the first the women had heard of it and yet neither asked any questions. Both just nodded. (2/15/80)

The overwhelming majority receive no such assistance and leave the shelter on their own accord. They are recorded as having made their "own adjustment" -- a euphemism for not knowing where they have gone. Many take to the streets for a while, make the circuit of the few privately operated shelters or reapply to the Women's Shelter when they can no longer tolerate the cold or harshness of the streets.

Charity Shelters

These are of two types: the smaller, more casually run shelters of the "Digger" type*, and the more established and deeply rooted missions. The missions' presence on the Bowery was secured with the founding of Jerry McAuley's Water Street Mission in 1872. We have not explored the missions as thoroughly as we have some of the street residences, though there is little reason to believe that they have changed materially in recent years, or that the classic descriptions of Kromer (1935), Bendiner (1961), Bonner (1967), or Wiseman (1970) do not still apply. The following is a brief inventory:

> Shelter in the two Salvation Army residences for men, Booth House and the Adult Rehabilitation Center (573 beds total), and in the one for women, St. Anthony's (169 beds) is characterized by an admitting process and routine similar to those found in the Women's Shelter. Private rooms or cubicles are, however, provided. In mid-summer, the men's residences had 96% and 100% occupancy respectively; St. Anthony's House had a waiting list. Rates are not cheap: Booth House charged men $335/month for room and board, out of a $409 SSI check. Another $15 is deducted from those who do not attend the psychiatric or treatment services they are assigned to. A representative from the SSI office offers on-site assistance to all those eligible in securing their checks.

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*This is our own, not their characterization of these shelters. The Diggers were a sixteenth century, utopian communal group, opposed to private property in all forms. They were rather summarily squelched by the state, but the term has survived as a general name for voluntary efforts on behalf of the disadvantaged, the agents of which often share the conditions of the people they serve.

> McAuley's Mission shelters 50 men on a nightly basis; first come, first served. The regulars know to get in line early. Soup, a sermon, showers and pajamas are given. Beds must be vacated early in the morning.
>
> The Bowery Mission is restricted to alcoholic men. Attendence to Alcoholics Anonymous meetings is required and beds are limited in number.

It is the Digger-type Shelters we are more familiar with. They commonly report full occupancy -- primarily, we suspect because they offer a form and quality of care far more respectful of dignity and privacy than that discussed above. Operating costs are met as best they can be through donations, intensive voluntary labor, and the medieval practice of mendicancy: what they don't have and can't buy, they beg for. The divulging of personal information is not a requisite for entry; some residents are known only by their first names. With time and the development of trust, some histories unfold while others remain hidden or forgotten. The ambience is informal, even chaotic at times; a premium is placed upon individual choice and differences while at the same time "community" is promoted. The voluntary staff live, eat and socialize among the homeless with enduring affection, patience and support. The unstinting commitment of the staff turns common drudgery into works of good will. Sleeping space is shared; food is bought or begged, prepared and served by the staff and homeless; holidays are celebrated; birthdays are remembered and social gatherings organized. Participation in religious activities is not obligatory, though religious messages and statues adorn most walls. The daily soup lines and lunch programs serve several times the number sheltered. Staff assistance in obtaining entitlements and medical care includes accompaniment to the proper agency, transportation, persistence in waiting all day or night in lines, and assistance in filling out forms and untangling bureaucratic requirements.

The Dwelling Place was formed by five Allegheny Franciscan nuns who made the decision to live a more simple life than the convent offered and who posed to themselves the question: "Who would be the lepers that St. Francis would befriend today?" They walked the streets looking for a building, found one at 409 W. 40th Street they liked, sent a postcard to the Cardinal asking for his help in securing the building ("Well, Francis went to the Pope and he didn't have an appointment") and three days later got the building. Catholic Charities has paid the rent for the past three years and though donations are not solicited they arrive "miraculously." The thirteen mattresses on the floor are available on a temporary basis and are always filled.

Mary House and Joseph House were established four and a half years ago by Dorothy Day and the Catholic Workers. Originally, they were houses of hospitality for anyone on the street. They soon became deluged with elderly people and those coming out of psychiatric hospitals, people who were difficult to turn away and who stayed, leaving few openings for newcomers. They serve as permanent shelters officially for 27 women and 35 men. Very rarely does a bed become free and generally the house is overcrowded. They will accept no public funding, and are well known on the Lower East Side.

Arthur Sheehan House was pieced together by Christian professionals, an ex-priest and volunteers and offers 12 beds for men on a semi-permanent basis. It is located in Brooklyn.

Star of the Sea was set up by a man who left the world of business in Cosmopolitan Magazine this past June to practice the word of God by sheltering homeless women. Unlike the others, he seeks public funding; to date, only private support has been forthcoming. Within a week of its opening, its 17 beds were filled. Its existence was threatened with an order to vacate the premises following an inspection by the Fire Department in June 1980; it remains in operation pending location of another site.

To be taken into one such enclave ensures access to three meals, relative security (though claims of stolen money and belongings do occur), shower and laundry facilities, social contact and help in negotiating entitlements and services. This is not to suggest that their advocacy efforts are always successful: the best of intentions and most tireless of efforts are still regularly foiled by the exclusionary policies and maddening regulations of a city bureaucracy:

> Mary House: "We rarely get people on income assistance the first try. After numerous, tortuous attempts, we can get some through. When we accompany someone, they're seen in the emergency room, but without Medicaid, follow-up appointments are practically impossible."
>
> A 22-year-old woman who was plagued by voices, sucked her thumb and had been living on the streets in a most disoriented state for a year, agreed to

> go with a Catholic Worker to a psychiatric hospital. She was taken to Bellevue three times but was refused admission. The medication clinic also refused to help her because she had no address.
>
> Another woman became very agitated, was screaming obscenities and attacking others in the house. Though she was aggressive in the emergency room at Bellevue, the doctor said there was nothing wrong with her and that she could go home. She was then taken to Cabrini Hospital and was admitted. (9/22/80)

In other instances, institutional ties are a distinct advantage: The Dwelling Place has easy access to the private Catholic Hospital (St. Clare's) located nearby; the two Catholic Workers' Shelters draw heavily on a Worker farm in upstate New York for their in-season produce. By and large, however, it is fair to say that the Digger Shelters in particular suffer from a lack of official recognition and appreciation of their efforts, the result of which has been to make effective linkage to public services at best a haphazard affair.

Some of the homeless remain in shelters as long as they are welcome or until another alternative falls their way; others make periodic or seasonal use of the shelters. Cooperation among the charity shelters that house women allow lost individuals to be found and referrals made in the rare event that a bed becomes open.

> Nellie, an Irish woman had been at the Women's Shelter several times over the past few years, had been to Mary House and the Dwelling Place and currently was staying at Star of the Sea. She indicated she would be there for at least a week, maybe longer. She offered her opinion on where the hospitality was most cordial, the food best, the staff friendliest and the residents most compatible. (4/17/80)

> Lisa was told she could not bring her postal cart filled with belongings into Mary House because of the lack of space, and would be limited to five bags. She went back to her corner on 14th Street until her cart was set on fire by youths on a spree, and then returned to Mary House. (9/22/80)

Given the scarce number of private shelters, the restrictive policies of the Women's Shelter and the forbidding reputation of the Men's Shelter and flops, it is not surprising that many of the city's homeless find themselves literally without any place to go at night. It cannot be stressed enough that the homeless will accept shelter under conditions of patience and trust. As one original member of the Dwelling Place recounted:

> There is not a woman on the street who does not want shelter. It's just that they are afraid . . . One woman used to ring the doorbell but would refuse to come inside. We used to give her food on the doorstep. Eventually, she agreed to come in and sit on the bench in the foyer. Three months later, she came up the stairs and slept in a chair in the living room. Now she sleeps in a bed . . . It's a matter of gaining their trust. (10/30/80)

Surviving without regular shelter requires pluck, patience, vigilence and a wiliness all its own. In the pages that follow we will attempt to describe some of these traits as they appear in practice -- as people attend to the daily survival problems of food, provisional shelter, security, cleanliness and companionship. We will also treat special resources they draw upon as well as some of the peculiar problems and obstacles they encounter.

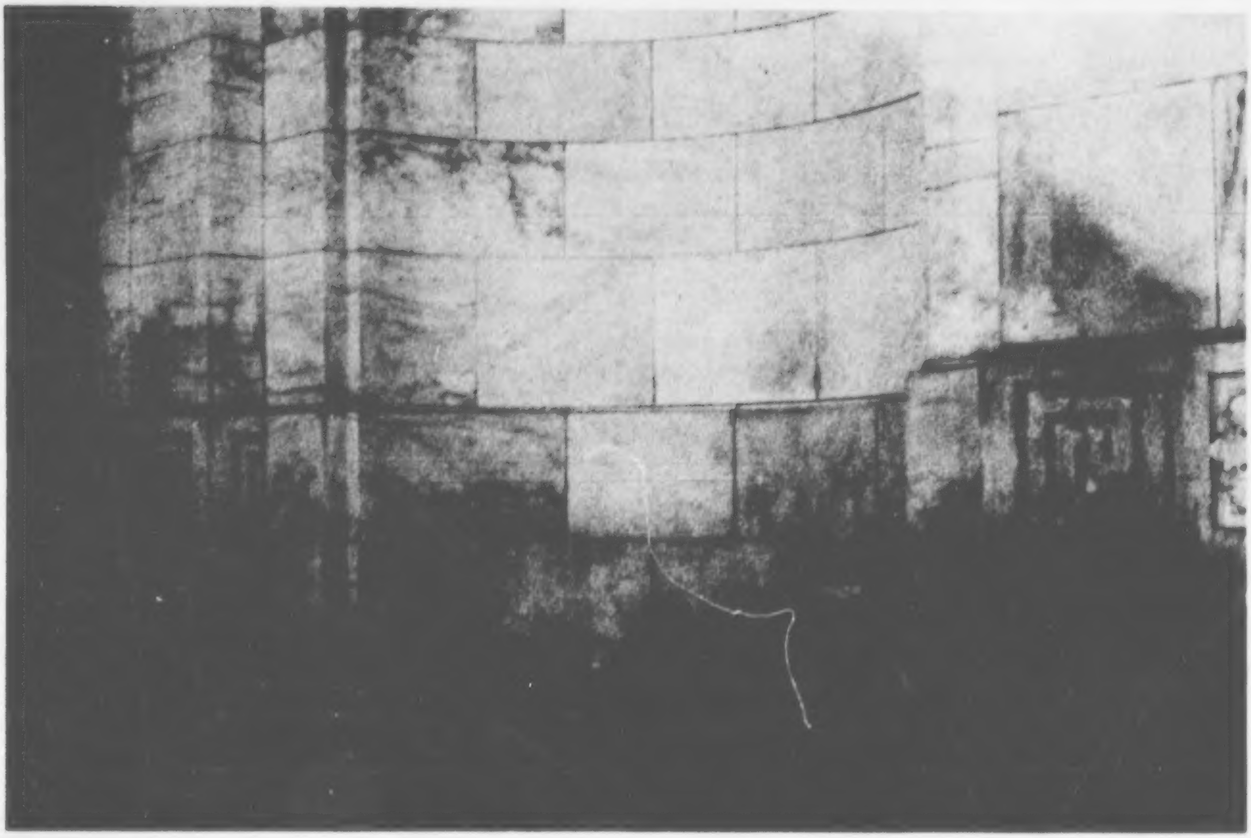
Life on the Streets

> On a bitter cold night at 2 a.m., the black man on crutches in the entranceway of a Grand Central subway station kept shouting, "All these people with no place to go, and they're white, too! No place to go, and white, too." Most of the tattered figures were lining the walls, immobile and awake -- others were wandering in search of spare cigarettes, talking to themselves or sleeping in heaps on the floor. (1/24/80)

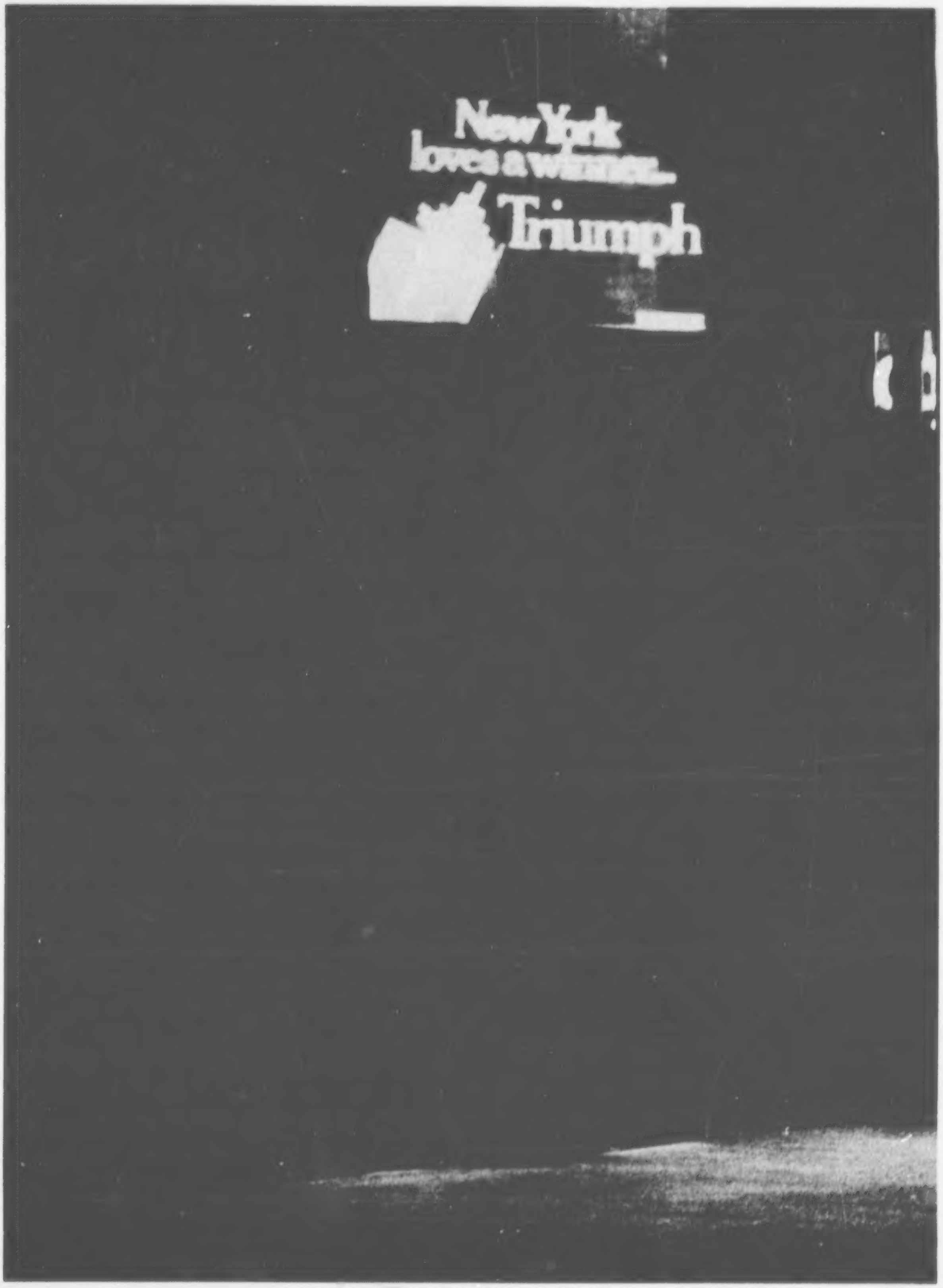
If the city's estimates of the total number of homeless are remotely accurate, the majority of the homeless seek shelter in abandoned buildings, parks, subways, bus terminals, train stations and the streets, and have far more tenuous connections to food, security, and other benefits and services. Some fare admirably well and skillfully make the rounds of the food programs, avoid police harassment and secure safe and warm places to sleep. It is not necessarily a matter of experience: after living months or years on the streets one can develop the necessary street wisdom or flounder. Most seem to do some of each; few appear to have worked out foolproof schemes. Tactics are regularly modified as the seasons, circumstances or one's state of mind change.

People on the streets must contend daily with a number of basic survival problems. In the following section, we review some of their ways of doing so.

Subway entrance, Columbus Circle (October 1980)

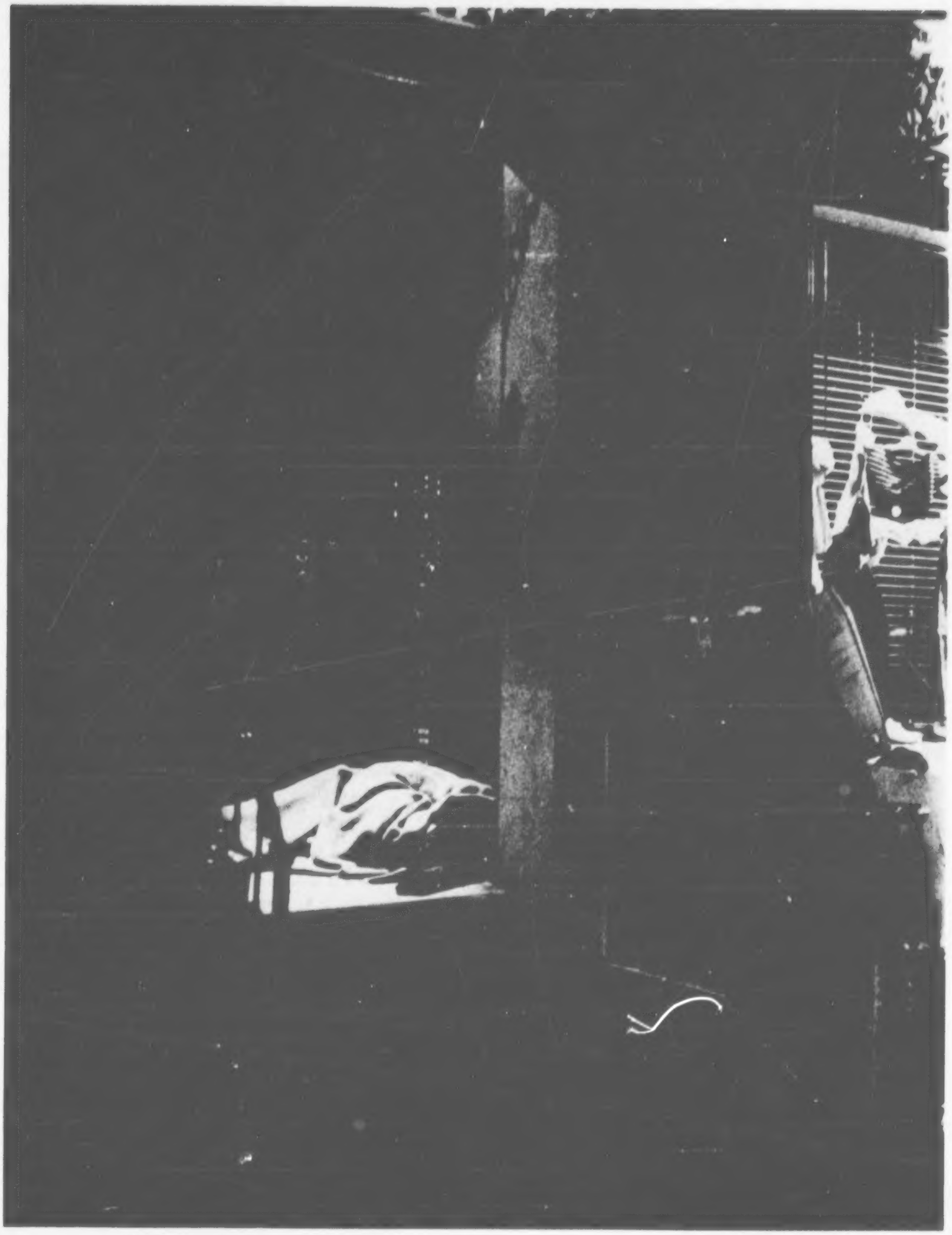


Entrance to New York Public Library (December 1980)



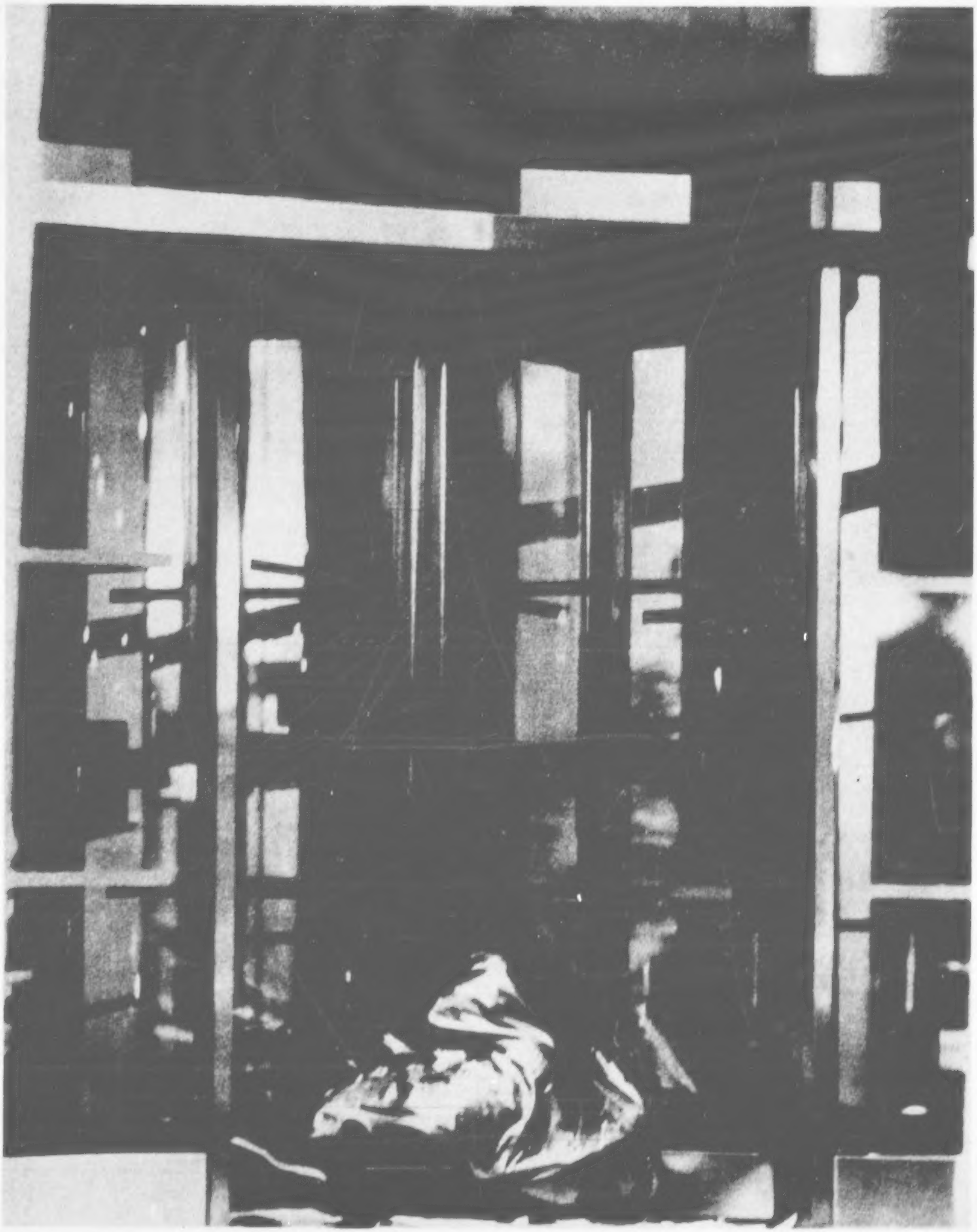
New York
loves a winner...
Triumph

Plaza at Madison Square Garden, (June 1980)



Doorway, Greenwich Village (May 1980)

Store entrance, Midtown Manhattan (December 1980)



Midnight, Sixth Avenue Office Building (June 1980)

Sleeping

Long periods of uninterrupted rest are a rarity on the streets. In mild weather, harassment by passers-by and the ever-present danger of mugging make sleeping fitful at best. Even the comparative safety seemingly afforded by nesting in a revolving door, at the entrance to one of the huge office buildings on 6th Avenue, in the well-lit 50's, proves no real haven: an elderly "shopping bag" woman was robbed in Rockefeller Plaza in mid-summer. Nor was this in any way an isolated occurence.

The hostility of natural elements as well poses problems. In winter months, street people huddle around the heating vents that blow warm air out of buildings onto the sidewalk, seek temporary refuge in loading docks in commercial districts, try to keep walking all night, ride the subways, or look for a berth in the all-night train and bus depots. Public spaces offer both relative security and their own special forms of harassment -- primarily by patrolling cops.

On rare occasions, a safe, accessible and warm refuge may be found. Squatters have taken over a number of abandoned buildings in New York City, and their ranks appear to be growing. Some of them have even managed to pirate plumbing, electrical and gas hook-ups. (New York Times, March 25, 1980; Kearns 1980,) Other spaces lend themselves equally well to imaginative housekeeping, such as the steam tunnels that run from Grand Central Station north under Park Avenue, where a colony of "hobos" has long resided:

> Grand Central Tunnels: Ken has a very neat (and regularly changed, it turns out) bed of newspapers, laid over a few thicknesses of corrugated cardboard. He's been in the tunnels off and on for 5 or 6 years. The immediate surroundings appear to provide for most of the bare necessities of survival: One can raid the parked trains for tea, soft drinks, wine, newspapers and magazines. The man who works the late shift in the commissary that stocks the trains will also hand out leftovers -- cereal, soups, cake and soda -- to the tunnel men late at night. Nearby pipes can be tapped for hot water, and, with a little ingenuity, can be jury-rigged into a shower. (The maintenance crews' locker rooms also offer toilet and shower facilities, if one is careful about it.) Water and food can be warmed on the larger steam pipes -- Ken regularly had a pot of coffee simmering. Lightbulbs can be pilfered to increase the illumination around one's camp -- allowing for reading and keeping the rats at a distance. Sinks nearby make washing clothes easy; they dry quickly in the heat of the tunnels (at least 80° in this section). The train workers don't bother the regular inhabitants -- unless you drink, another resident informed me, in which case you're out if they catch you. And one can usually avoid the police, by coming and going through protected passages. (December 1979)

Until recently the steam tunnels were a well-kept secret. The disclosure of this colony's existence in the popular press changed that, with adverse effects for the men living there:

> Two and a half years ago, the tunnels came to public attention through a feature piece in the N.Y. York Times. Since last December, one news team from the L.A. Times, another from the N.Y. Times, a camera crew from a local television station, and an odd free-lancer or two have made their way down these dark corridors. Articles appeared throughout the country.

> On a recent visit to the tunnels, I found that the predictable had occurred. The tunnels have been purged. The two safe entrances which had allowed the men access without detection have been welded shut. A locked gate has been installed, closing off what had been a large sleeping area. Spigots have been removed from the faucets tapping hot water lines. Signs have been posted warning that that the area is now patrolled by Conrail police and attack dogs. The tunnel floors have been swept clean of the makeshift camps the men had set up. An odd pair of shoes, some discarded containers, a few cigarette butts remain -- aside from these hardly a trace is left of the former residents. (March 1980)

Other spaces still enjoy the relative obscurity that the tunnels once did, and, for the time being, offer safe haven:

> Train Station: At 11 p.m. the attendant goes off duty and women rise from separate niches and head for the bathroom. There they disrobe, and wash their clothes and bodies. Depending on the length of line at the hand dryers, they wait to dry their clothes, put them in their bags or wear them wet. One woman cleans and wraps her ulcerated legs with paper towels every night. The most assertive claim toilet cubicles, line them with newspapers for privacy and warmth and sleep curled around the basin. Onee they are taken, the rest sleep along the walls, one on a box directly beneath the hand dryer which she pushes for warm air. One of the women regularly cleans up the floors, sinks and toilets so that no traces of their uncustomary use remain. (4/23/80)*

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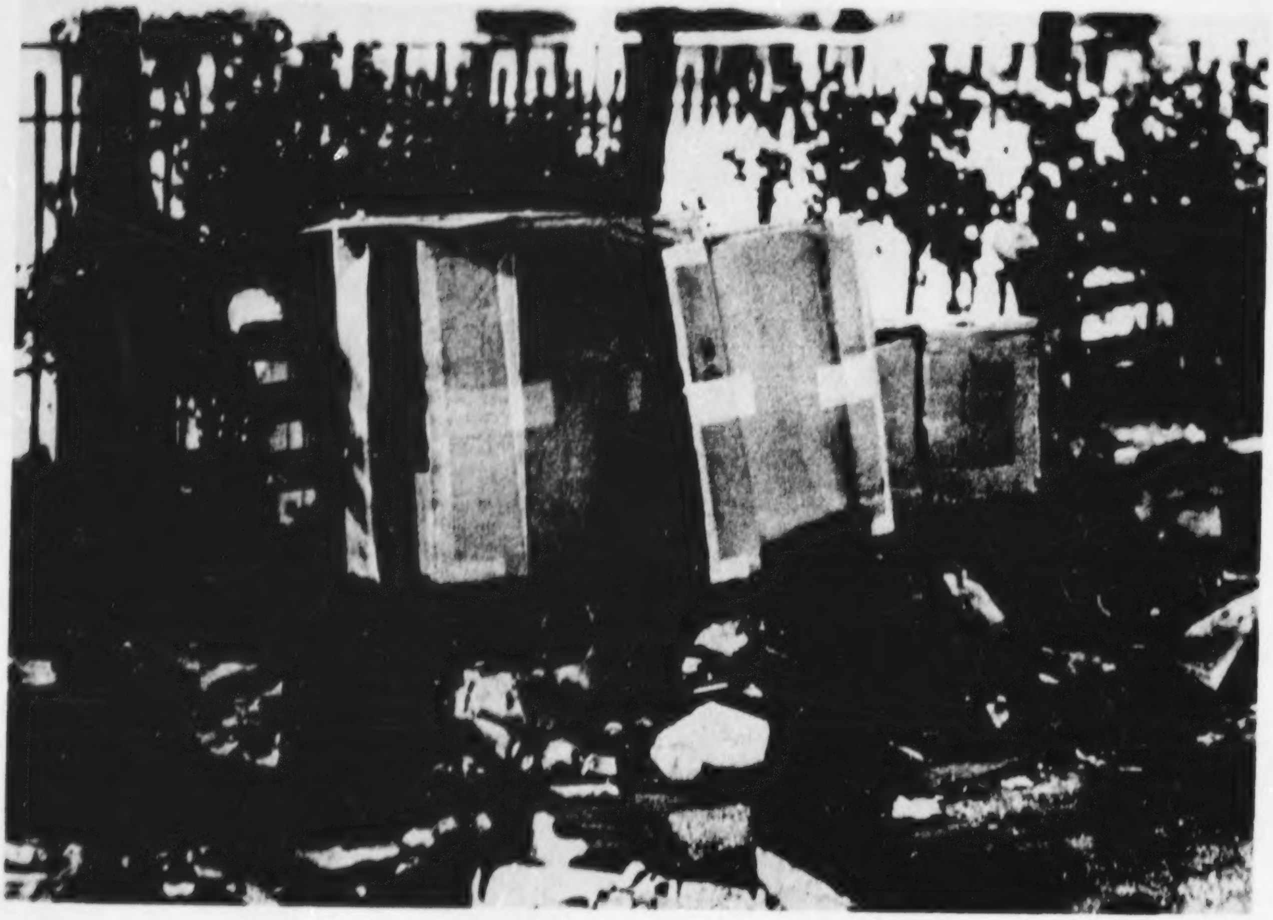
*As this report was being written, a television crew doing a story on "the other New York" for the station's coverage of the Democratic Convention stumbled upon this hideaway. Predictably, they were unable to resist the story and marched in with lights, cameras and microphones late one night to interview women sleeping there. The next week 17 million viewers saw how these women of various ages and stages of sanity and sobriety encamp there, to the probable embarrassment of the station authorities, who, up to this time, had turned a kind eye away from the bathroom at night. It remains to be seen what action this will prompt on their part.

Young man sleeping on a bed of newspapers, steam tunnels north of Grand Central Station (December 1980).

Room in abandoned building, Lower East Side (May 1980), where several homeless people stayed.



Makeshift dwelling for the night: four cardboard boxes on a park bench, Herald Square (June 1980).

Food

It takes very little food to keep a human being alive but even meagre pickings can be hard to come by on the street and are sorely lacking in nutritional value.

> 23rd Street: A man in tatters carrying two shopping bags stopped at a box of trash next to the gutter. He found a crumpled up foil ice cream wrapper which he made flat and licked clean.(9/2/80)
>
> Grand Central: I stood near a garbage can and within 15 minutes saw four men sift through the upper portion and find nothing but paper and empty soda cans. One shook a can and raised it to his lips for the remaining drops.(3/12/80)

Sandwiches and coffee are had by over 300 men and women at 7 a.m. daily on the breadline of St. Francis of Assisi Church, an institution that dates back 50 years to the Great Crash. Soup lines and free lunch programs are provided at various churches and missions around the City, not all of which require attendance of a sermon in exchange. Countless owners and managers of coffee shops, fast food counters and concession stands are known to give meals, coffee, stale bread or other leftovers to the homeless as long as they do not sit down for long or otherwise offend customers. A few street people have long associations with the vendors and merchants on their turf and can rely on handouts, enjoying the luxury of choosing what and when they will eat.

> 14th Street: Lisa doesn't ever need to beg for food as she is very well known by all on the stretch between 6th and 7th Aves. She stands near a concession stand or a menu outside a coffee shop and is handed food. In one coffee shop she is not allowed to sit down, but is regularly given her favorite meal, spaghetti to take out. Once she was handed a souvlaki stick but didn't like the looks of the piece on the end, returned it and proceeded to the next stand where she received another more to her liking. (Interview with Ann-Marie Rousseau, April 23, 1980)
>
> 16th Street: A woman with two or three coats on and a sweater barely stretched over it all entered and stood near the counter. She smelled strongly, which caused all customers at that end of the coffee shop to turn and stare. I asked her if she wanted some coffee, to which she replied in a frightened voice, "What do you want from me?" The manager intervened and said, "Valerie, calm down, she's alright." He turned tc me and said, "I always give her free coffee," then glancing back at her, "But you're going to pay me back when you get your chedk, right honey?" He laughed and said, "Her check is always late or lost or something. She has never paid me." Valerie muttered something about her check, drank her coffee in one long gulp, picked up a plastic bag filled with scraps of bread and left. The manager said he didn't mind saving bags for her but that he never knew when she would show up. He knew only that she slept in subway stations along the A train line. (1/7/80)

For others, even with money in hand, admittance to eating places is denied them.

> George Washington Bus Terminal: We entered the cafeteria together and she prepared to sit down while I ordered and paid for the food. The manager directed her out even when I intervened to say I was paying for her lunch. He said that she had to wait outside while I bought the food and that we would have to eat it elsewhere. "She

> always comes in here and messes up the tables, and I have to call the police to get her out of here." (1/7/80)

Cleanliness

For some, filth and odor serve as a conscious and articulated defense against intruders (Schwam 1979). A repellent appearance can protect homeless women, to a degree, from the harassment of men on the prowl (see p. 90). However, the same tattered and odiforous clothing limits access to coffee shops and draws the attention of the police patrolling train stations and terminals. It becomes a matter of trading safety for the warmth and comfort of drinking coffee or having a meal inside. For others, it is a sign of mental disorientation or a practiced obliviousness to the norms of dress and appearance. Of course, to speak of foulness of appearance as either a deliberate protective device or a sign of underlying disorder is to ignore one outstanding fact: for the penniless, public bathrooms, bathing and laundry facilities are so scarce, and access to them so limited, that cleanliness is virtually impossible. To take but one index: lice infestation is rampant on the streets. The Holy Name Center on the Bowery offers delousing for men but there are no delousing facilities for women. Delousing in a hospital requires admission and is vigorously avoided by staff and, in turn, by their administrations.

> A psychiatrist has approached Bellevue's administration to adopt an arrangement whereby delousing could be done without admission, thus saving

> the $374 cost of admission for those who simply need a bath. The request was ignored. (August 1980)

Toilets for women in subway stations are few and far between and often locked. Clothes can be turned inside out to show the cleaner side but after several turns there is no difference. Men can shower for 75¢ at Grand Central but unless they have been able to acquire clean clothes, the improvement is noticeable only to themselves. Women do the best they can with the sinks and hand dryers in public bathrooms. Attendants in bathrooms maintain certain prerogatives and can assist, ignore or refuse the homeless entry.

> Grand Central: An elderly Irish woman has the 11 p.m. to 6 a.m. shift in the bathrooms even though the station is closed from 1:30-5:30 a.m. She spoke compassionately of the women, especially those that "aren't right in the head and don't know any better," many of whom come to wash at 5:30. "They are so dirty. I don't mind if they use the bathroom and sinks. They have no place else to wash, poor souls it's a pity." (1/24/80)

> Grand Central: Jane always used to wash her hair in the sinks but as she began to do so one morning was told by an attendant that "the sinks are only for taxpayers." She left outraged. A couple of weeks later when her hair became an unmanageable mess, she bought a wig from a street vendor to make herself more presentable to the stores and restaurants she frequents. She washes herself with rubbing alcohol and wears attractive clothing given to her by a co-worker at the Public Work Project job she holds.

Ingenuity helps, but can hardly be said to suffice:

> 14th Street: "I wash my hair by putting lotion on it and getting a towel or a piece of blanket and then I wipe it until the grease gets off. I put alcohol on it. That gets the cream out right away. Once every six months I get two cups of hot water from the restaurant and douse it with that. . . When I need a shower, I get a gallon of water from the home relief station and I wash, but lately I can't seem to get a clean can. If I can grab a restaurant I go in there, but if they get mad at me I can't go into a restaurant and if I can't go there I pee outside." (Rousseau, p. 20)

Despite their sometimes slovenly and verminous appearance efforts by many homeless people to maintain personal cleanliness and an orderly space around themselves run counter to the prevailing notion of people void of any concern for their appearance.

> George Washington Bus Terminal: When Anne puts out a cigarette on the floor (no ashtrays available) she picks up the butt, wipes the ashes off the floor with a napkin and throws it in the trashcan. Likewise, she throws away any unused bags and pieces of paper she finds and wipes the crumbs from her seat. She said, "I don't see why all these people can't throw away their garbage. People have to keep this place clean, you know. A man comes through everyday and sweeps and mops the floor, and I don't want to make it any harder for him. Look at this place, it's a mess." (4/11/80)

> Penn Station: In the midst of a heavy rainstorm a cop told us to leave the underpass. She picked up both our coffee containers and the bag they had come in, although debris was strewn on the ground around us, saying that she didn't want to give the cop any reason to justify the

> callousness of putting her out in the rain. I doubt he even noticed but she had preserved her pride. (6/31/80)

Money: Panhandling and otherwise

Though existence in the bus terminals and train stations is interrupted and hardly comfortable, long-time residents become familiar with such amenities as bathrooms, fast food stands, bountiful trash cans, storage lockers and more pay phones per square block than most other areas. It's not that the homeless often have someone to call:

> Penn Station: The two elderly sisters do not panhandle or accept any food from strangers. They exist solely on the dimes they find left in pay phones. All day long they alternate making the rounds of the phones, in half hour shifts. One stays with their three bags of belongings and coats while the other enters one booth after another with methodical purpose. (6/2/80)
>
> George Washington Bus Terminal: The waiting area at the terminal is lined on two sides with pay phones. Cathy regularly goes through all the coin returns but says she rarely gets enough for a cup of coffee. She panhandles directly outside the terminal door to avoid making trouble with the police and management inside, but that is also not sufficient. For days she had been eating and sharing with other homeless women a huge bag of stale jelly donuts found in the trash of the Twin Donut shop across the street. (4/13/80)

Although some of the homeless ask for change from passersby in order to get by, others are either too worn to bother or too proud. As far as possible, they adhere to the values of the world moving around them, transgressing its rules only in desperation, when all else has failed.

> "When I run out of money I beg for coffee and a bagel and live off that, but I don't like to beg too much and I hope I never have to again. When I worked I didn't like anybody to do this either, but then we lose our pride. When you lose your pride it's the worst thing. Nobody thinks you're any good. When I want a quarter, I need it, I get it, and I can tell all those people on the streets today I might never see them again, but they're sure lucky becaase they have their pride." (Rousseau, p. 81)
>
> Grand Central Tunnels: Dave subsists largely, on his account, on unsolicited handouts. "I don't ask; I don't like to ask." People just see him, looking forlorn -- "down and out," as he puts it -- and come up and offer money, coffee, or a sandwich. (12/6/79)

The contaminating value of a hand-out, the way it structures relations of patron and client dependency, is also recognized by some:

> 34th Street: Ken has repeatedly refused my offers to buy him something to eat, even when I myself am eating. At most, he will accept coffee. He usually protests that he had a lot to eat (like seven boxes of cereal) two nights earlier. I suppose his being toothless makes eating difficult and possibly embarrassing also. But a different sort of pride is at stake as well. Today, refusing my umteenth offer of a hamburger, he added: "I don't want it to interfere with our friendship, you know?" I explained, once again, how the project has allotted money for just such a purpose, but to no avail. (12/10/79)

Phone booths are much sought-after as sleeping spaces
being safe, clean, and relatively private;
this one is at Grand Central Station (October 1980)

Public lockers can serve as closets, pantries and safe-storage.

Public men's room -- washing up and cleaning sores (May 1980)

Work and Welfare

The homeless who work intermittently or who have been able to negotiate the income maintenance systems successfully can live substantially better than most on the streets. Though rarely can enough be accumulated to secure a permanent or decent place to live, the necessities of food, second-hand clothing, storage space, and other comforts can be purchased so long as a frugal budget is adhered to. Social Security and SSI checks are sent (with some bureaucratic resistance) to General Delivery or banks at the first of the month. Welfare is practically impossible for the homeless to secure. The Waverly Welfare Office has been designated as the one which will accept application from those without an address, but this fact is not conveyed to those who apply elsewhere. Documentation of ineligibility for SSI and unemployment compensation must be provided. In addition, written proof of the type of support received (even if there has been none) over the past year, a birth certificate and social security number are required. The welfare offices simply check the boxes on the form indicating needed documentation and tell them to return once they have obtained them. Those who get on welfare do not necessarily get assistance without strings.

> Penn Station: Jane must work 15 hours a week in an office in exchange for her check. In effect, she is being paid just barely above minimum wage for her part-time labor. Though she is willing to work more hours that would not increase her allotment. She has never missed a day of work even though she often gets little sleep and must travel a long distance with all her belongings in tow.(9/2/80)

A few of the most skillful are able to falsify addresses and produce rent deposits in order to receive higher allotments from the welfare department. However, as with all on assistance, bureaucratic bungles occur with reliable frequency.

> Grand Central: Linda had convinced a friend to let her use his address, spent hours in lines to get the preliminary forms accepted, and waited several days for appointments. Her case was approved, but the check never arrived. She reported it to the office over the course of an afternoon and was told that if it had been lost, another would be issued four days later. Another was issued to her upon further questioning and after several hours of waiting. The next check was expected the first of the month but again did not appear. She began the process to have it reissued for the second time until someone found it in a drawer of returned checks. The check had no apartment number on the address despite the fact that Linda had printed it numereus times on all the forms. One would think that apartment numbers would be familiar to the city's welfare system. Linda asked that in the future the apartment number be included in the address but the clerk appeared too hassled to remedy it. Predictably, the next check also failed to arrive. She was informed that the case would be closed because too many checks had been returned. (8/18/80)

Some men earn money be selling clothes and junk acquired by sifting through garbage to second-hand stores or other buyers -- although as often as not the proferred goods appear to be as much an occasion for conversation as they are a medium of exchange.

> Bowery: After visiting Robert's roost -- a quilt thrown down on the floor of a closet in an abandoned building on Prince Street -- we head back up the Bowery. It must be about midnight by now. Robert stops occasionally in the bars along the way, trying unsuccessfully to peddle a package of chicken parts he had retrieved from the trash somewhere and a white dinner jacket he'd picked up. Earlier he had tried to give the chicken away to a shopping bag woman he'd met on the street, but she turned him down -- "I think she was mentally ill," he surmised. The next time I ran into Robert he was trying -- again unsuccessfully -- to unload a couple of garish wigs and a broken phonograph; appeared to be doing a lot more talking than selling. (5/15/80; 6/18/80)

Others pick up jobs leafletting or unloading trucks or as messengers or dishwashers, often through the agency of one of several labor pools in the Bowery area. Occasionally, merchants along Canal Street will hire men off the streets for a few hours of spot work. Some men take seasonal labor on farms on Long Island or in the South; others are recruited for summer work in the Catskill resort areas.

Some work arrangements appear to be quite favorable and steady:

> Kenton Hotel: Eddie works every day at a foam rubber plant across the river in Jersey. Got the job through the agency on Great Jones Street. Owner sends a van over every morning to pick him and several other guys up. Pays a decent wage -- above minimum. Enough to keep Eddie's room paid for at the Kenton (a little greasing of the desk clerk's palm never hurts). (2/22/80)

Others are decidedly exploitative:

> Learned of an ingenious recruitment procedure practiced by some of the more distasteful operators of resorts in the mountain region. After luring a man away from Camp La Guardia with promises of decent wages and quarters, the company puts him up for the first two weeks until his first paycheck. When it finally arrives and the guy realizes how large a cut they are taking for food and living quarters, he is often so incensed that he quits, goes on a binge and winds up in the local tank. Who should show up to bail him out and pay his fine, but the shifty operators themselves. The guy is, in effect, indentured to them until he pays off his debt. (4/25/80)

Although by no means a universal feature of their existence, the hoarding of things of real or imagined value is a common practice of the homeless. Indeed, a rag-taggle collection of things is probably the most distinctive hallmark of the street-dweller's way of life. For those who do cart things around in bags or boxes, the effort appears to be stubborn attempt to preserve some aboriginal sense of home. If one cannot claim a constant place, at least one can fill the space one happens to occupy at the moment with familiar things -- fragile linkages to history and family; embodiments of memory and hope.

Some carry nothing, others so much that mobility is restricted to movement ten feet at a time. The containers hold plastic forks and spoons and styrofoam cups, used paper and plastic bags for wrapping food to be saved, clothing, personal treasures, towels, soap and assorted other items of varying practical value. Owning belongings beyond what can be carried is costly and burdensome and yet their accumulation appears to arise from both practical necessity and the desire to hold on to the few possessions that have not been lost or stolen. However motley, it's all they have and is guarded closely. Certain finds cannot be passed up easily: a coat, blanket, scarf or hat for winter; shoes which do not fit perfectly but may be good enough when the others fall apart; an umbrella thought to be useless by someone but better than nothing; or anything at all that might be sold. Many support several lockers at the bus and train stations. These are used as closets, storing treasures saved over the years and heavy winter coats; as pantries stocking choice food remains; and as personal space, the last remnant of a private domain -- at fifty cents a day.

> Madison Square Park: Jane described the two cardboard boxes attached to a luggage carrier as a "millstone around my neck." It is extremely difficult for her to climb stairs with the load and she has been limited to using subways with escalators much of the time, though offers of help to carry it up stairs have been surprisingly frequent. The wheels fall off and the boxes tumble off and split in the middle of the street too often. She has been robbed five times when asleep and has little of value left, but she is unable to lighten her load. In addition, she has two boxes in hock at the baggage department (the contents of which she is uncertain of) and supports five lockers at two stations. Things have been stolen out of her lockers and the baggage fees are too high, so she is forced to carry with her all the essentials for daily living and items she never wants to lose. Eventually the luggage carrier gave out, and she had to tote around several bags until her check arrived. Then she bought a large canvas bag with a strap and wheels. (8/18/80)

Possessions also provide occasions for exchange and sharing, and while the frail networks of friendship and mutual aid of the skid row alcoholic have been described (see especially Rooney 1970; Nash 1964), those of the homeless outside of skid row and its drinking establishments have received comparatively little attention. This, in turn, has led to the currency of the not entirely inaccurate image of them as isolates lost in an urban throng.

Companionship

With the exception of the men and women who reside in established shelters, most of the homeless people we have spoken with appear to spend much of their time alone. Given the readiness many displayed in talking with us, this isolation is initially a bit perplexing; it does not appear to be a self-chosen exile. The well-populated places many of them pick as stopovers on their appointed rounds are not simply hedges against danger: like bars for the lonely, even if one does not speak to anyone else, at least the illusion of company can be sustained there. For some, the absence of companionship is clearly unsettling:

> Grand Central Tunnels: Asked what he found most difficult about this way of life, Dave replied unhesitatingly: "The loneliness. You get used to it, you know. But it's not good. It's just no good to live without people. You get funny without people to talk to." He added that talking to me was the first time he'd had an extended converstaion "with a regular person" (i.e., someone from "the outside") for about a year. The last time had been a photographer down for a story with a news team from the *Times*. (12/6/79)

Several causes of isolation can be hazarded. Prominant among them would be fear of strangers -- a fear undoubtedly fueled by occasional mistreatment at the hands of passersby -- and the repellent quality of the strange mannerisms, bad odor and vile appearance of some of them. Others simply do not want to assume the responsibility for ongoing relationships, preferring (for whatever reason) to avoid burdens of mutuality or concern. Still, despite the nomadic independence many of them evince, networks of mutual aid appear to thrive, at least on an intermittent basis. When needed, this may involve the sharing of food, alcohol or whatever shelter is available:

> George Washington Bus Terminal: Anna had had nothing to eat since the hamburger I had given her the day before, except for a brown-paper bag of crumbled cookies mixed with cheese crackers, obviously the remains of a traveller's bus snack. She accepted my offer of another hamburger adding that "Rita could use a cup of coffee too, if that wouldn't put you out too much." Upon returning with the hamburger and coffee she insisted that I eat some of her cookies in exchange. Rita offered her bag of stale donuts found in the trash across the street to both of us. After all had been consumed, Rita took out two empty styrofoam cups and ice tea mix from her bag and with a plastic spoon dug from the bottom put a spoonful in each cup, filled them at the nearby fountain and stirred them. Rita handed one to Anna never having asked her if she wanted one and was thanked. Perhaps she knew she didn't have to ask. (4/13/80)
>
> Grand Central Tunnels: Ken clearly concerned about "the old man" who stays in a different part of the tunnels: "He's not doing too well." He regularly inquires as to how Dave is. Whatever he can pilfer or get as a handout from the commissary, he shares with Dave -- though, not

> infrequently, he is incensed to find that, while he was out, Dave has raided his camp and eaten a carefully stockpiled batch of cereal or potato chips, or drunk an entire pot of coffee. (January 1980)

For the most part though, the circuits appear to be lines of information exchange. When a decent, non-demanding shelter opens its doors, word quickly gets around of its existence. This occurred two years ago when The Dwelling Place began sheltering homeless women. Within a week of its opening, it was filled to capacity. More recently, when the Coalition for the Homeless offered food and safe haven to street people as part of the "vigil"* held this past August, word quickly made the rounds and dozens showed up nightly to take it up on the offer. Such experiences as these raise real doubts about the validity of many service providers' statements that the trouble with these street people is that they won't accept help when it's offered.

Casual charity: The kindness of strangers

One of the more remarkable of our initial findings was the ease with which street folks responded to offers of unsolicited aid. As noted earlier, only a few reacted with hostility or suspicion. It became apparent that such offerings are a not uncommon occurrence on the streets, at times going beyond the simple gift of spare change. There are lone individuals distributing food, clothing and kind words to the homeless in a quiet non-intrusive fashion. Others set out to do far more, and, depending on their approach and resources, can enjoy a significant degree of success.

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*During the Democratic Convention, the Coalition for the Homeless offered food, medical care and a place to rest in the courtyard of St. Francis of Assisi Church, located one half block from the Convention Center. The vigil was organized to draw attention to the purging of Madison Square Garden and the surrounding area of its destitute residents for the duration of the Convention and to publicize the urgent need for a shelter in the midtown area.

> Grand Central Station: Ford and I had been standing around in the subway entrance since about 1:00 a.m., shivering every time someone came in off the streets. Around 2:00, an acquaintance of his arrives, a neatly dressed man of 40 or so. Apparently, he lives nearby, has a job and steady income. He offers Ford a half a loaf of rye bread and a cannister of butter. In exchange, Ford gives him a few plastic Bic razors that he had foraged earlier that day when the lockers in the station had been cleared out. Ted makes idle chatter for a while, then walks over to stand by himself for a while in the drafty corridor. Ford says he often comes down with something to eat. (1/24/80)
>
> 32nd Street: Bill is a nightwatchman who devotes his life to the most disoriented and dishevelled homeless. He talks to them on the street, recording their customary eating and sleeping places on index cards so they can be found in the future; writes away for birth certificates and social security numbers; takes them in hand to the welfare or social security offices and fills out the forms; loans them money until the case is processed; makes appointments to clinics and accompanies them there; locates hotel rooms; pays their rent and visits them regularly for the remainder of their lifetimes. He follows about 35 of "his people" with tyrannical officiousness, to the consternation of welfare clerks, landlords and hospital staff with whom he is in persistent contact. His knowledge of the intricacies of the income maintenance regulations, ability to locate the few affordable hotel rooms that remain, finnagle deals with

> landlords when there are no rooms available and monitor medical and psychiatric care ensures that his people will get whatever they are due. He no longer goes down to the Bowery, as he cannot in good conscience refer anyone to the Men's Shelter. There are also far more homeless than he can possibly help in the midtown area. He feels he has just about reached his limit -- both because there are only so many he can assist on a consistent, long-term basis and because SRO hotel rooms are becoming impossible even for him to secure. (6/24/80)
>
> 32nd Street: Stewart and I had had coffee on several occasions, at the coffee shop across from the breadline, usually in early a.m. This day he was late, and I had already eaten breakfast. When he arrived, I persuaded him to have a full breakfast himself. When I collected the check, we had only been charged for a single breakfast. At other times when I showed up alone, the waitress would often inquire as to how my "friend" was doing. She had often seen him in the breadline in the morning, and his bedraggled appearance was a dead giveaway of his circumstances. Too, she had overheard a number of conversations we had had at the counter and had figured out that he had spent some time "in the hospital." She never fails to remark even the slightest improvement in Stewart's appearance, and promised to bring in some of her husband's discarded clothes next week. (June 1980)

Particular Problems

There are a number of additional and insistent problems homeless people must deal with. Among them are harrassment, medical care and sexual victimizing.

Some passing pedestrians give food or money even when not solicited, though the majority pass with heads held high and a few offer disdainful remarks. In the train stations and bus terminals, the police and crowds provide a sense of security and a few hours of sleep in the waiting room chairs or benches can be had so long as one remains sitting up. The security is double-edged and following either orders to "clean up" the station or an individual sense of their "duty," the police move the homeless along with varying degrees of forcefulness. At the site of the Democratic Convention in August 1980, the area surrounding Madison Square Garden and Penn Station, a prime haven, was purged of its destitute figures for the sake of the delegates and their impressions of New York. Despite the "weeding of the Garden," as one newscaster crudely put it, some of the homeless remained in view, owing to their own resiliency and the inability of the police to displace such a large and transient group. The everyday dealings of the police toward the homeless are generally less rigorous and systematic, and may even evince a certain tolerance.

> Port Authority: The cop rapped his stick against the chair next to where the woman was slumped over sleeping, said, "Outa here," turned and walked away. She moved slowly, rearranged her bags and within a minute had gone back to sleep. The cop was not in sight. (12/18/79)
>
> George Washington Bus Terminal: Anna told me the police on the evening shift knew her and one, with whom she was on a first name basis, would sometimes let her stay. The others always insist she get out even though the terminal is open all night. She walks the streets for a brief time and returns knowing she has some time inside before the next round. She said one of the other women hides in the toilet stall in the bathroom and gets herself locked in for the night. Anna is fearful of resorting to that, though she wishes she wasn't when it's cold or raining outside. (4/13/80)
>
> Grand Central: When the station closes at 1:30 a.m. the police arrive on scooters to rouse those who are sleeping and round up those hidden in corners,

> alcoves and the network of passages. As gestures of pride, fear or resignation, most of the regulars leave before being ordered to do so. Some head for the subways or streets, while many end up in a nearby entranceway that prohibits entry to the station with a police blockade and yet is enclosed, protecting them from the cold. (1/24/80)

Ever since 1967 when vagrancy was decriminalized in New York State (a ruling later strengthened by the Supreme Court in 1971), the homeless cannot be removed from the city's public places for the mere fact of their unsightly presence. However, they can be picked up for trespassing in the bus terminals, train stations and subways. Violations are rarely enforced, though warnings can be stiff.

> Grand Central: Ken graciously offers to accompany me so I won't lose my way. Walking across the lower level of the station, we spot two guys who look like railroad workers, and decide momentarily to admire the architecture. Not for long: "O.K. fellas, we're cops. Get up against the wall." Docilely, we comply, are frisked and the stocky blond cop radios in our location. He recognized Ken: "He's the one who had his picture in the Times, the one who hit Donnelly (?) about 10 years ago. . . He set fire to a car a couple of months ago." Within seconds -- the police station isn't far away -- two others descend upon us and we are frisked again. One rifles through the contents of my wallet and pockets; the blond one interrogates Ken about the pocket knife he carries. To wit: "You fucking bastard, what do you need this for?" "Whittlin'," Ken replies quietly. Upon which, the cop swats Ken on the head and jams the closed knife into his throat, "You talk to me like that, I'll take you apart." To me, the cop asked,
> "How long have you known this guy?"
> "About two months."
> "You sleeping in the tunnels with him?"
> "No."
> "You know this guy -- you know what he'll do? He'll fuck you in the ass and then rob you. You

> know that? Huh? Unless you like that. . . ?" Ken was told if they caught him around there again, he'd be broken in two. Then they let us both go. Ken punching the telephone booth on the way down the street. "He took my fuckin' protection. They always do that." (Still angry, fuming, the next morning when I dropped by.) (12/16/79)
>
> (Addendum: later that spring Ken was picked up on a charge of trespassing and this time was incarcerated for a month at Rikers.)

The police see the same individuals over and over again but are reluctant to do more than move them along because, as one said: "The hospitals don't want them. The courts don't want them. And if they don't ask for help, the charities can't do anything" (New York Post Nov. 16, 1976). Although homeless women elicit a more sympathetic response than the men, public attitudes are still laced with fear of contamination.

> 23rd St. Subway Station: A cop responded to my question about homeless women, "I don't go near them. . . you need to wear surgical gloves. They're diseased. I don't want anymore phone calls at home telling me that someone I picked up yesterday has lice. By that time it's too late for me. You can even get TB from them. . . I don't touch them anymore. I guess most of them are ex-mental patients, huh?" (8/1/80)

Access to medical care is made easier with the Medicaid card for which the recipients of SSI and welfare are automatically eligible; many on assistance remain without one, due to their unfamiliarity with regulations or because of complications in the application procedure:

> In a rebuff to the class action suit on behalf of homeless men, the city claimed that C.F., a plaintiff, was on the Medicaid rolls and therefore

> receiving a form of public assistance. The defense lawyer asked the city to get him the card. To the city's chagrin, a computer run revealed that F. had, in fact, applied for Medicaid but was denied because the Men's Shelter was not considered a permanent legal address. That regulation has since been changed but F. still has no card. (8/21/80)

Even without a Medicaid card, the homeless are entitled to treatment in municipal hospitals, though entitlement does not necessarily mean they are treated.

> Coffee Pot: Reverend Meadows, who directs a drop-in center for homeless people, tries to work closely with the hospitals, but has found them uncooperative. Unless she escorts a person and sits with them until they are seen, they will not be treated. "The hospitals think an undomiciled person wants to get off the street. In fact, most such people are very fearful of hospitals." Rev. Meadows has found that if she tells the hospital staff that the person is undomiciled, he/she will not be admitted; so, to avoid this, she gives the address of the church. (1/25/80)

At the Men's Shelter access to medical care is haphazard -- as when a call goes in for an ambulance to pick up an "unconscious" man who, it turns out, is merely louse-ridden and a wan shade of yellow (lice and jaundice being two of the staff's greatest fears); dealing with the problem in this fashion, incidentally, meant that a city ambulance would be out of service three hours for fumigation.

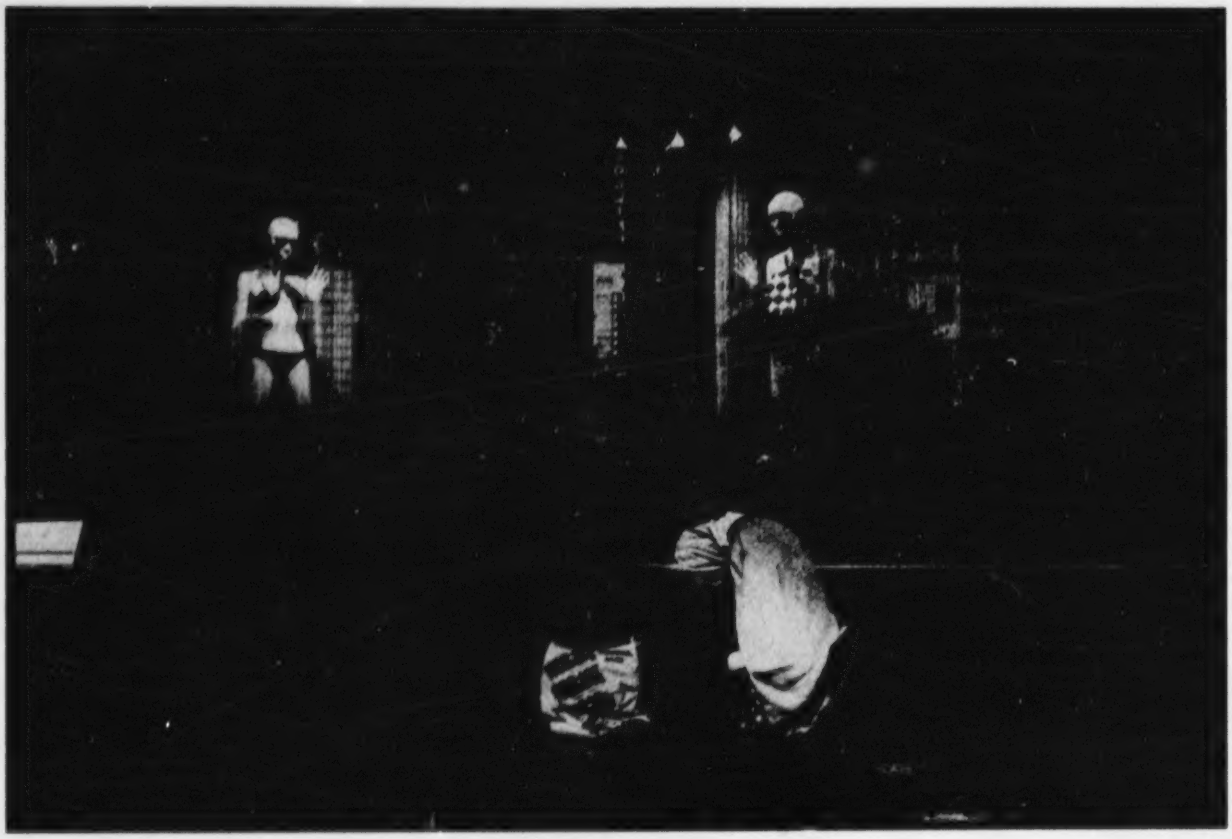
More often, however, the meagre clinic resources -- open, at my rate, only during daytime hours -- lack of outreach efforts, and previous poor experiences with clinic staff, all conspire to keep men and women with urgent medical problems on the street. Ulcerated legs, lacerated heads, and grime-filled wounds are commonplace. Prostate problems appear to be quite common among older men as well.

Finally, homeless women, especially those who try to maintain their personal appearance, are easy prey for men on the prowl.

> "I met a lot of people who said they could help me, but actually just wanted to take me to bed. On 42nd Street and 7th Avenue a man came up behind me with his hands like this, and I yelled and screamed at the top of my lungs and he took off. . . They figure you are out to make money. The pimps wait around because they think the first thing a woman will do when she is destitute is be a hooker." (Rousseau, p. 102)
>
> Grand Central: The elderly woman standing in the corner of the subway entrance at 2 a.m. warned me not to speak or smile at any of the men. We ignored the two who approached us by remaining silent and looking at the floor. She said, "They are so obscene. The younger ones are not so bad. It's the older ones who are filthy." She motioned toward a woman standing near us, "She keeps herself very neat and the men are always after her, poor thing. It's best not to let her know you're looking at her because she is always afraid that people are after her. She is here every night, as frightened as a mouse." The young woman she spoke of was approached several times by the same two men and kept shaking her head "no." I could see her trembling thirty feet away. (1/24/80)
>
> Financial District: Jane has been staying in a cardboard box along an alleyway with several others, mostly men, for months. Unlike her stay at Penn Station, she is able to stretch out for the night and "once inside no one knows if you're a man or woman." Although she has become one of the regulars, she does not feel safe among them. One evening, the leader of the group taunted a man who was quiet

and friendly towards her to "get her." He entered her box and threatened to kill her when she insisted he leave. The next morning, Jane overheard the leader ridicule him mercilessly. Though she is terrified, she has no choice but to return each evening. She is most fearful when they have been drinking, avoids conversation and hides in her box, lying awake until they are quiet. (8/7/80)

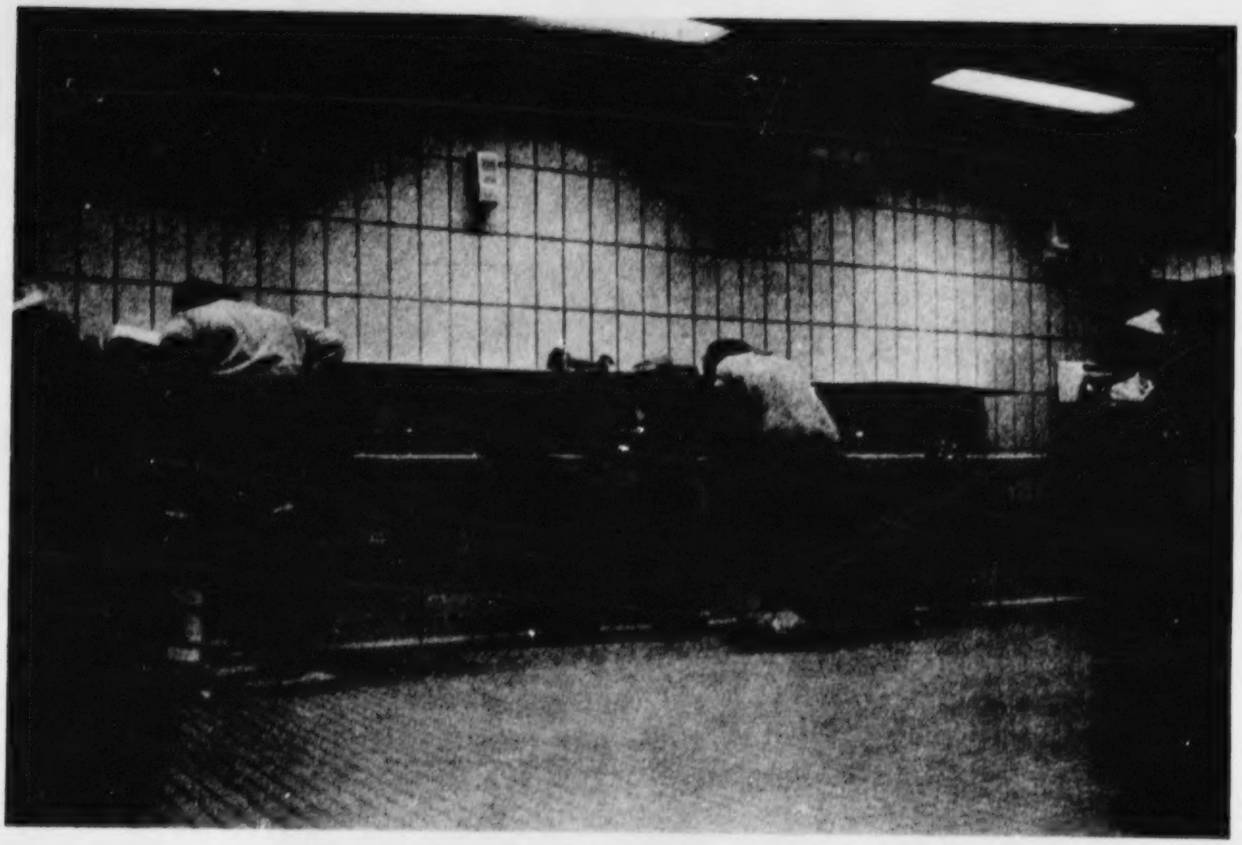
The store of belongings can become quite cumbersome.



Midtown Manhattan

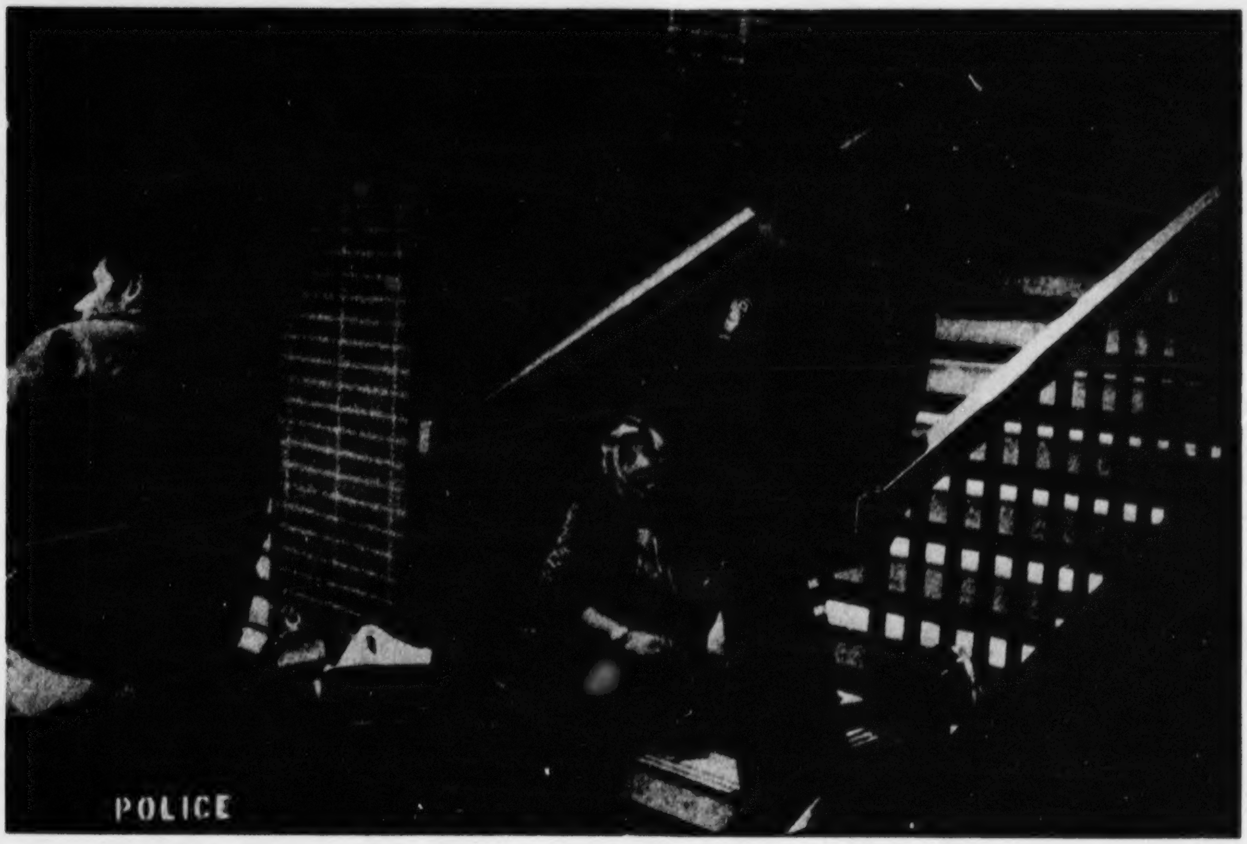
Foyer to public women's bathroom, where more than a dozen women may spend the night.

Others choose the subways.



When attendants go off duty at public restrooms,
women use the facilities to clean themselves and their clothes.

Ulcerated feet and legs are commonplace among street dwellers.



The most common interruption at public transportation stations.

PART IV

DISCUSSION

Postscript, February 1981:

Scores of homeless men and women used to sit along the ledge surrounding Penn Station all day and night. In response to the eyesore, massive concrete flower pots were placed along the ledge around the main entrance on Seventh Avenue. To a quick commuter's glance, it appears that the problem has been eliminated. But the tattered figures with their bags alongside can be found behind the concrete facade. The point is an obvious one: flower pots may be one "solution" to the problem of homelessness, but only in a distant, cynical sense.

The increased demand for shelter by men this winter was registered in the census at the Keener Building. Originally reported to hold a capacity of 180 men, average census during the winter months of 1980-81 has been over 500, and as high as 622 men. Cots now fill the halls, recreational and office spaces. The artist colony whose studios were on the first floor was evicted. The number of staff, toilet facilities and showers has remained constant despite the near three-fold increase in numbers of men sheltered.

Severe overcrowding in the hotels and at Keener led to opening the Men's Shelter on East Third Street for use as an overnight residence for up to 135 men -- this over the strenuous objections of the shelter staff. No additional workers were assigned to serve these men. The staff has filed suit through its unions, claiming that such adverse working conditions not only endanger staff members but impair the quality of service they can provide as well.

The increased demand for shelter by women this winter forced the city's facility on Lafayette Street to use its recreational space for cots each night during the coldest spells. Capacity at the Bushwick annex increased from 90 beds to 160.

The class action suit, Callahan v. Carey, came before the New York State Supreme Court once again in January 1981. The plaintiffs charged that the city and state were in contempt of the court order of December 1979, specifically those sections which ordered them to provide clean bedding and adequate supervision. Conditions at the Bowery hotels and Keener Building fail to meet such standards, they argued. It remains in litigation.

In early February the State Office of Mental Health deployed 15 mental health professionals to do assessment, evaluation and referral in the city's shelters for men and women. Their tenure is reportedly limited to between three and six months. Assigned to serve only those who admit having been in a state psychiatric hospital, they are authorized to re-hospitalize in state facilities the few who are eligible and willing. Those who are determined to be in acute need of inpatient care but who refuse voluntary admission, go the usual circuit of police escort to a municipal facility. No direct care is provided; it is simply an assessment and referral scheme.

The goals of the Quality of Life Project were twofold: first, to document and analyze the life circumstances of homeless adults in New York City who are dependent upon the public sector for their sustenance; and second, to develop explicit standards for the provision of humane residences and services for the mentally disabled in the community. Once preliminary evidence was gathered regarding the meagre nature and extent of public provisions for this group, it was determined that other methods of addressing the problem were needed more immediately. The urgency of their circumstances demanded that research findings be used to support advocacy efforts. The project is being conducted in concert with and on behalf of people whose ability to effectively articulate their needs and place them before policy-making bodies is severely limited. The following section reviews our findings, examines one promising mode of advocacy (the courts) and presents a "model" of sheltering care which the public sector should be encouraged to emulate.

This report has concentrated on one subgroup of the mentally disabled in the community, those without a fixed place of residence. We have described our methods of inquiry and the receptions accorded us. We have surveyed the array and conditions of public and charity shelters currently serving the homeless and have placed these resources against official estimates of the need for shelter. It seems clear that even conservative estimates of that need vastly outstrip the resources available for meeting it. What public resources do exist, moreover, have their own deterrent power. The deplorable conditions of the flophouses and Keener Building, high incidence of violence, routine contempt meted out to applicants for shelter, and historical association of the Bowery as the abode of "bums," all make the Men's Shelter the place of last resort for many homeless men. For different reasons -- namely, exclusionary policies, limited beds, and the militaristic regimen -- the Women's Shelter can effectively serve only a small proportion of homeless women. This is true especially for homeless people afflicted with disorders that render them acutely sensitive to the slightest trace of menace in their surroundings, and make it notoriously difficult to gain a sense of one's environment as trustworthy. The private shelters are a notable exception to the above characterizations, but their numbers are few and resources tend to hover just above subsistence.

Of primary interest in our research was the oft-repeated complaint of service-providers that the problem with the mentally disabled on the streets is that their judgement is so impaired as to make them victims of their own unwillingness to seek assistance or to accept it when offered. Our findings suggest a different interpretation of this commonly reported fact. Given the state of the public shelters -- or, perhaps more accurately, given the nature of the personal costs exacted when one submits to their regimens and conditions -- the decision by many homeless people to fend for themselves on the streets gains at least a measure of intelligibility. Where decent, humane shelter has been made available, it has never lacked willing recipients. In light of this finding, one may be moved to wonder whether the presumption of incompetence on the part of the disabled indigent has not more the character of a self-fulfilling propnecy than it does that of a faithful reporting of the "facts." Could it be that the "inability" of many of them to accept help is, in fact, a reasonable decision to seek relief -- however shabby and unsufficient -- elsewhere? So long as present conditions persist, moreover, is it not plaussible to assume that the same pattern will continue, furnishing yet more "evidence" of the "hostility" of the homeless to efforts on their behalf?

The second section on survival patterns in our report described in some detail the circumstances of those living on the streets. Its objective was primarily ethnographic: to document how the homeless meet and resolve daily problems of sustenance; we touched upon the resources they tapped, networks of information they relied upon, responses they elicit from those around them and special efforts made on their behalf. The evidence we have adduced allow for little else than the impression that the lives of these people hang in exquisitely fragile balance, subject to the whims of those who control access to public spaces, the caprice of casual strangers, and the hazards of rain and cold weather.

Of special concern in appraising the situation of the homeless is the fact that the forces contributing to the problem -- persisting unemployment, scarcity of low-cost housing, and the ill-planned release of mental patients from state institutions and subsequent tightening of admitting criteria -- appear to be continuing. If anything, the strength of the first two factors is increasing; and while a determined re-assessment of the plight of ex-patients in the community has been under way for some time in the precincts of mental health policy, the fruits of that effort have, to date, been restricted to those who remain within the mental health service system. Few attempts have been made to locate those long since lost to the system.

In such a situation, advocacy efforts provide a critical counterpoint to prevailing policy. And yet, even here, there are problems with what goes by the name of advocacy. In the fields of mental health and social service, advocacy has become a legitimizing catchword for virtually anything rendered with the best of intentions, however little it may accomplish in fact. Most such efforts define "the problem" in terms of individual pathology or misfortune and direct their energies toward alleviating the plight of identified "cases." Generally, this means seeking a larger, better coordinated and more comprehensive service package. While such efforts are not to be disparaged, neither can they be defended as sufficient, given the evidence on the state of the medical, psychiatric and social service systems in New York City. Current studies suggest that they are in disarray: underfunded, understaffed, lacking facilities and critically overburdened by the numbers of disabled dependent persons "in need" (Robbins et al., 1979; Gers, 1979). In such a situation, vigorous efforts on behalf of individual petitioners may occasionally be met with some measure of success simply because a disorganized "system" will respond to point-pressure. But this in no way constitutes an effective strategy for genuine reform. Nor can the reality of scarce funds and incoherent policy absolve the public medical and welfare agencies from their responsibilities.

From a policy perspective, the homeless are doubly problematic. In the first instance, they are evidence of the failure of the service model in practice, people who have not been reached, or who fail to avail themselves of assistance in the form in which it is offered. They are casualties of a "system" whose promise far outstrips its capacity to deliver. But this is to ignore the circumstances under which the service promise is extended, and the tasks it is expected to undertake. Our survey of the plight of the homeless in New York City suggests strongly that the promise itself is suspect. A service perspective which sees their problems as ultimately amenable to the ministrations of skilled "providers," if only the right mix of services and mode of delivery can be devised, is a deluded one. The reason is simple: the problems of the homeless run deeper than the services which mental health and social service professionals can supply.

For the mentally disabled on the streets, therapeutic and survival imperatives are intimately linked. Here, perhaps more so than anywhere else,

> there is always an interaction between clinical and social problems. It is rarely possible to separate the two in any way that would be convenient for the development of independent medical and social services. (Wing and Olsen, 1979:172)

The fact that such a separation is an enduring fact in New York City is not, we would argue, so much a matter of deliberate policy as it is an artifact of a refusal to formulate a policy on homelessness on any basis but expediency. The unintended consequences of mass deinstitutionalization, the pressure of budgetary cutbacks in the social service sector, jurisdictional disputes among city and state agencies, the impotence of the constituency involved -- all have combined until recently, to keep the issue of the disabled dependent off the docket of policy-makers. It took a class action suit to put it there.

Advocacy on behalf of the homeless must be double-edged and consciously so. It cannot fail to demand the improvement and expansion of present mental health and social services at the same time as it must insist upon a reconceptualization both of the problems of disability and dependency and, in turn, of the appropriate public response to them. Specifically, shelter should be recognized as a basic human right; its denial, therefore, should be seen as an affront to justice and decency. To go without shelter -- which includes (following Judge Tyler's order of December 24, 1979) clean bedding, wholesome food and adequate security and supervision -- represents something more than a mere failure of service delivery. To go without shelter is to be deprived of essential elements of livelihood. This is not to say that services are not needed. Services can, and in certain instances must supplement the provision of shelter; but services themselves, however energetic and sophisticated, cannot compensate for deficiencies in living circumstances (Jurow, 1979).

In the present period, the courts have served as an arena for addressing two questions: whose responsibility is it to provide shelter for the homeless and, what is the precise nature and extent of that responsibility? With regard to the first, neither of the two obvious candidates, the State Department of Social Services and the State Office of Mental Health (and their city counterparts) has been willing to assume responsibility. Periodically, they express concern about the homeless, but have cited other more pressing stipulated responsibilities and budgetary constraints in explaining their highly limited response. The State and City Departments of Mental Health have offered to finance the mental health components of shelter and nothing else; the Department of Social Services refuses to become the housing broker for discharged mental patients. The homeless as a group are not eligible for the categorical funding available from either office. Neither sees the problem as falling within its precinct of responsibility or competence. Both look to the voluntary sector to respond to the need for shelters. To date, there have been few takers, and for good reasons: public funding is expected to be insufficient to cover costs; community opposition will delay, if not prevent, the opening of shelters; and zoning regulations, housing and fire codes place severe obstacles in the way of would-be applicants.

With regard to the second question: the statutory basis for the public's responsibility for the homeless is clear.* The needy residing in New York City are entitled to secure lodging, decent food, appropriate medical aid when necessary, and facilities for maintaining personal hygiene. The mentally disabled among them are entitled to support, care, treatment and rehabilitation. What is not clear is the precise way in which that responsibility will be met. The class action suits brought against the city and state on behalf of homeless men are intended to clarify what the above entitlements mean in practice. The effort has shown both the utility and the limits of the legal route of redressing grievances. The Court ruling in Callahan v. Carey which ordered the city and State to provide such additional beds as would be needed for all homeless men who apply, has proven to be a limited victory. The outcome, the Keener Building, shelters men in an isolated setting, under conditions of overcrowding, bleakness and sterility. Conditions there are similar to, although generally safer than, those found in the flophouses. Of special concern were the great number of men in deteriorated health, physically and/or mentally. A second law suit (Jablonski v. Brezenoff) was filed, arguing that the quality of shelter provided was intolerable, and seeking better conditions as well as medical, psychiatric and social services. The case is still, at this writing, in litigation.

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*See New York State Social Service Law (62(1)); New York City Administrative Code (604.10(b)); and the New York State Mental Hygiene Law (7.05).

Given that the city's conception of shelter has proven to be minimal, it is clear that criteria of adequacy or decency are not to be taken for granted. Judges are known to be reluctant to involve the court in questions of quality of care of surroundings. However, there are precedents which suggest that both specific guidelines as to what constitutes quality care and enforcement procedures to insure the implementation of the ruling, lie within the legal prerogative (Willowbrook Consent Decree, 1975). The coming months will tell first, whether the population of homeless women will be judged entitled to shelter at all (a lawsuit is in preparation which would require the Shelter Care Center for Women to accept all those that apply, an extension of the Callahan v. Carey case); and, second, whether decent sheltering accomodations will be made available to both men and women. The outcomes of both suits will provide an indication of the extent to which the homeless can rely on the legal system to correct some fundamental deprivations.

Putting the issue of who will assume the responsibility for the homeless aside, a search for "model," or just plain decent, sheltering programs led us to the voluntary sector, where provisions for the homeless if insufficient in number and varying in character, are humane. Their humanity is, in part, based on a fundamentally different conception of serving people. To illustrate what can be done, a description of the Pine Street Inn of Boston, is useful. The Pine Street Inn opened its doors to homeless men over 60 years ago. Since that time it has undergone changes in clientele, ownership, staff, and, recently, location. But the guiding philosophy remains the same: to meet the needs of the homeless with the dignity and respect that is properly their due. This means not only providing a decent meal, clean clothes, and secure lodging, but also offering companionship, comfort in times of distress, medical attention and referral to other sources of assistance. Informally, there is another "service" available here. There is always someone to tell your story to -- even when they've heard it before and half the parts are no longer retrievable. The Inn is a refuge which for many has become a home.

Pine Street is located in one of the satellite commercial districts in Boston's South End, a neighborhood of loading docks, office buildings, heavy traffic and cheap taverns. It occupies three stories of a building nearly a block long and half a block wide. On the grounds of the Inn are two small, vest-pocket parks, where its guests may while away the hours free from harrassment and protected from those who prey on the homeless.

The Inn currently provides shelter, meals and clinic and referral services for up to 500 men and women daily. Three hundred men and upwards of fifty women are housed nightly in dormitory-style quarters; an additional hundred and twenty men and a dozen or so women sleep in the lobbies located just off the two entrances to the Inn (separate ones for the men's and women's sections). The building itself -- occupied only since the winter of 1979 -- is something of a landmark, a renovated firehouse with a distinctive Florentine tower. The spacious areas can hold a hundred or so comfortably. Benches and tables are of sturdy butcher block and steel. A set of exposed 12' by 12' timbers cross the ceiling; huge cathedral windows make for a well-lit space in daylight hours. The parks described above, as one of the staff members put it, are places "where the guests can drink safely" and stay out of trouble.

The services provided by the Inn are not in themselves remarkable, except, perhaps, in their comprehensiveness. It is the manner in which they are provided, the spirit of the place, which is, in our experience virtually unique. To take a surface indicator: rituals of courtesy figure prominantly in the Inn's relations with its guests. All the men are addressed by "mister"; inquiries are regularly made as to how one's day has gone: and guests are asked, not ordered, to cooperate when something needs to be done. A short stay teaches one that these are both signals of the trust and respect extended to all who arrive there, and the medium through which those attitudes are first conveyed.

A brief description of the Inn's modus operandi follows, organized around the themes discussed earlier:*

Security at the Inn is provided by both the policemen on duty throughout the afternoon and evening hours, and by the staff. Violence has been a problem in the past, and staff members rely upon longstanding relationships with the men to break up quarrels and quell outbursts. Good relations with the police department have proved beneficial on any number of occasions: a squad car is only minutes away at any time by telephone. Men can check their valuables for storage on a nightly basis; live-in staff (recruited, for the most part, from the ranks of former guests) are allotted a locker for longer-term storage of possessions and, on a seniority basis, may obtain private rooms. A staff member is on watch the night through on each of the dormitory floors. Should a guest require emergency attention, an ambulance can be at the premises within minutes.

Cleanliness has proved much easier to ensure in the new and vastly improved quarters. Beds are assigned on a nightly basis. Each guest staying in the dormitories is expected to shower and turn over his clothes and belongings, and is given a cotton nightshirt. Clothes are stored in a "hot room" which effectively disinfects them. Shower facilities are commodious. Each bed is equipped with sheets and blankets. Nightshirts and bedding are washed daily in the laundry facilities on the premises. All other spaces -- kitchen, lobbies, eating areas and clinics -- are kept scrupulously clean. Much of the maintenance work is done by former guests now employed as live-in staff.

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*Only the men's facilities will be described in detail; the women's section is laid out in a similar fashion, although on a smaller scale, and with more attention to personal privacy.

Meals are served three times a day. Men eat in shifts on a first come, first served basis. The evening meal is perhaps the most social of occasions. Every night, a different volunteer group (civic and church groups, for the most part, recruited on an ongoing basis), prepares, transports and serves the supper. Part of the contract stipulates that those serving the meal are expected to mingle with the men and get to know them. Since most of the groups return on a regular basis, the arrangement works out well.

What the Inn refers to as counseling services include information exchange, referral services, advocacy and simple companionship. The object is emphatically not to "rehabilitate" the men,* only to provide "the essentials of life" in a homelike atmosphere. The brochure distributed to volunteers put it this way: "the goal of the Inn . . . is to help the men optimally adapt to the lifestyle they sustain by choice or fortune, neither encouraging that lifestyle nor censoring it." But where need is keen and willingness to seek help is forthcoming, assistance in obtaining the proper help is always available. Referral services -- to detox centers, outpatient clinics, city welfare and other entitlement agencies -- are in constant use. A regularly-updated handbook contains information on alcohol and drug rehab programs, psychiatric facilities, nursing homes, social security and welfare requirements and procedures, V.A. benefits, housing and work opportunities, and special services for young people and those in need of temporary assistance to return home. Spot work is often available; current offerings are posted on a bulletin board in the lobby. Probably crucial to the success of the referral services is the fact that the Inn provides transportation to the designated facilities. To take one instance: a van carrying on average thirteen passengers each time leaves the Inn thrice daily to take people to detoxification centers. Equally important, relations with the staff in these sister institutions serving the homeless are maintained on a personal, face-to-face basis.

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*Those desiring to change their way of life may make a beginning by joining the live-in staff, and advancing through a graduated set of responsibilities and privileges.

Two nursing _clinics_ operate on an evening basis, staffed almost exclusively on a volunteer basis. Screening for tuberculosis, treating minor ailments and wounds (especially the ulcerated legs that are the hallmark of the homeless), and seeing to it that men and women adhere to the treatment regimens prescribed elsewhere are their primary responsibilities. They are the repository of the only thorough "charts" in existence on street people. In recent years, much of their time has been devoted to assisting persons recently discharged from mental hospitals. The psychiatric nurse on duty there estimates that fully 50% of the men and 90% of the women at the Inn are ex-patients. For the most part, their efforts are devoted to keeping people on prescribed medications and referring emergency cases to acute care facilities. By a special arrangement with the state department of mental health, Pine Street referrals are not governed by the usual catchment area restrictions; they have access to half a dozen different facilities in the area.

The recitation of available services does little to capture the atmosphere of the Inn. To do that, one must resort to anecdote or the occasional telling incident. One instance may suffice here, a practice repeated nightly with, so far as one can determine, similar consequences. Drinking is not allowed within the Inn proper. To ensure adherence to the rule, late-comers are frisked as they enter the lobby. On the nights this was observed, the frisking was done by two young, attractive women, and yet not once did a man -- however inebriated or out-of-sorts -- make a false or inappropriate move. It was clear that rules of proper conduct were well established and closely abided by. In later conversation one of the women related how she had gradually learned how to touch the men -- and the frequency and ease with which guests are touched by staff is perhaps the most distinctive feature of the Inn -- by watching other staff and getting to know the guests over time. It is consistency of contact, the regularity with which courtesies are extended and reciprocated, that allows such a practice to flourish.

Much of the credit for the success of the Inn must go to the extraordinary staff working there -- on a paid, live-in or volunteer basis. The majority of the paid staff are young, well-educated men and women with a firm commitment to the work. Many are recruited from neighboring colleges, where they are majoring in the "human services" field. First contacts were, almost universally, on a volunteer basis -- often as part of fulfilling the "practicum" requirements of some course. Tenures are usually limited to a few years at the Inn, but replacements have not been difficult to find. Regular staff meetings and grievance sessions help keep morale unusually high. Relations among staff are close outside the Inn as well. A number of them, in fact, share a large house in the area. Among the older staff are a large number of "recovering alcoholics" (their characterization), with a solid personal understanding of at least one of the afflictions rampant among the guests. As for the live-in staff, perhaps it will suffice to note that they have all "been there."

The large number of staff on duty at any one time makes it possible to settle disputes or remove them elsewhere in relatively short order, without resort to the sticks, threats of retaliation or abuse so common in public shelters. In part, we suspect, the low incidence of such incidents is a tribute to the high quality of the surrounds; rarely have the men and women who reside there been accorded such "luxury." It cannot but reflect upon one's self-image in a beneficial way: qualities of self-worth are inevitably read into the quality of the surroundings deemed appropriate for one's residence.

The lesson of Pine Street is perhaps best summed as one in the self-imposed limits of other shelters for the homeless. Pine Street shows what can be done -- if the energy, resolve, resources and organization are there to accomplish it.

PART V

RECOMMENDATIONS

The problem of homelessness has reached such extraordinary proportions in recent years that it can no longer be dealt with in piecemeal fashion. The plight of those temporarily or permanently homeless cannot be relieved by stopgap measures thrown into service each year as winter approaches. A comprehensive, well-integrated policy is desperately needed, one that will insist upon the joint responsibilities of New York State, New York City and voluntary agencies and recognize that coordinated action by mental health and social service departments is essential. For mentally disabled individuals on the street, the distinction between clinical and survival needs has long since lost any meaning. The hardships of street living exact both mental and physical casualties.

The true dimensions of the need for shelter will not be revealed until it can be translated into effective demand and it will not become such a demand until the deterrent features of current sheltering arrangements are removed. Numbers alone give some indication of the extent of unmet need. We estimate that the present sheltering capacity of New York City -- including public and private facilities -- to be roughly 3200 beds.* Official sources estimate the population of homeless people to be 36,000. The following recommendations are primarily remedial, directed toward securing shelter for the more than 32,000 still on the street and toward improving the conditions of those now sheltered in public facilities. To help slow the growth of the homeless population we propose several preventive measures as well.

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* This figure excludes beds in lodging houses on the Bowery not used by the city.

Immediate Measures

1. The most urgent need for shelter exists during the winter months. Action must be taken immediately to prevent deaths from exposure -- deaths which could be averted by the most minimal form of shelter. Armories, unused hospitals, school buildings, hotels, theatres, *in rem* buildings, church basements, virtually anything with a roof and walls could be used to accommodate homeless people at low cost and in short order. It is essential that such emergency measures be developed in conjunction with the short-term and long-term measures to follow. Otherwise, when spring arrives emergency provisions vanish and the problem is set aside until the following winter.

2. The conditions in the Men's Shelter, the Keener Building, and the Bowery hotels under contract with the City demand immediate attention. All these facilities are overcrowded, understaffed and poorly equipped. Security is often lax and minimal standards of decency are regularly flouted. The Shelter's toilets at night are deplorably maintained and inadequate in number. In the hotels, mattresses are filthy and often vermin-infested; sheets and blankets are scarce items and are almost

invariably soiled when supplied. Showers are far short of the number needed and often out of order.

The isolated location of the Keener Building and the difficulties in using public transportation to reach the island make necessary a reliable and efficient method of transportation. The small vans that run from the Shelter to the island do so irregularly. Waits of several hours are not uncommon. Additional transportation, leaving from sites other than the 3rd Street Shelter, is needed to avert the deterrent effect of having to be processed at the Men's Shelter.

Finally, basic social, medical, and mental health services should be increased at all the sheltering facilities for men. Consideration should be given to at least rudimentary outreach efforts (perhaps by Community Support Systems teams) in the Bowery hotels.

3. The admission regulations at the Shelter Care Center for Women are overly restrictive and should be revised, in order to accommodate rather than exclude more of the women who currently reside on the streets. Specifically, the requirement of psychiatric clearance from Bellevue, the denial of shelter to physically disabled, intoxicated or drug addicted women, the mandatory shower and medical/gynecological examinations, and the complicated intake procedures should be modified in accord with the needs and fears of homeless women. Shelter -- on a chair, mat or cot in the lobby or day room -- should be offered to those who choose not to comply with the revised regulations. Transportation to the Bushwick annex of the Women's Shelter should be provided to the women who are housed in that facility.

Short-term Measures

1. The development of public shelters for homeless men and women throughout Manhattan and the outer boroughs is long overdue.

Voluntary shelters in the New York area and other urban centers are clear evidence that such facilities can be operated at low cost and provide decent, humane shelter and food with minimal disruptive impact on the surrounding neighborhood. The provision of shelter rests, in part, on adequate public funding. However, the quality and form of shelter care are of equal importance.

2. Large shelters accommodating two to three hundred beds should offer both formal services, such as food, clean clothes and bedding, security, showers, medical care, and informal supports, such as staff members who will listen to the problems of those who wish to share them. The quality of staff selected is crucial. Sensitive, committed and energetic staff persons should be sought. Consideration should be given to recruiting in schools of social work, local colleges, CETA programs, etc. Individuals who have themselves experienced and overcome disabilities, alcoholism or homelessness would be highly desirable as staff and counselors. Admission criteria should not be excessively rigid or restrictive. Provisions should be made to accommodate the homeless in whatever manner they will accept. A two-tiered system of shelter would do much to accomplish this. A shower could be required in exchange for a bed and those who choose not to

take a shower would be allowed to sleep in the lobby, on chairs, mats or cots. The Pine Street Inn of Boston (for details, see discussion section) is a model for the development and operation of such a shelter.

3. Also desirable are smaller shelters where food, facilities for maintaining personal hygiene, informal support from staff, and assistance in obtaining medical care and income maintenance benefits would be available. Efforts by voluntary agencies would be especially welcomed in this regard. A caring, non-coercive setting where no strings are attached to the offer of shelter can be assured of attracting more than enough homeless people. It cannot be repeated too often that the homeless will accept shelter in a climate of patience and trust. To ensure ease of access, such shelters should be decentralized, located in areas of the city wherever significant concentrations of the homeless can be found. The Dwelling Place, Mary House and Star of the Sea in New York City (for details, see Part II) exemplify the qualities of small sheters for the homeless.

4. With the offer of temporary residence, operators of shelters must attempt to make provisions for placement elsewhere, acceptable to the homeless individual, before he or she leaves.

5. Given the substantial proportion of the homeless population who are mentally disabled, we urge that the State Office of Mental Health and its New York City Regional Office assume responsibility for this

group by developing a plan to provide specially designed shelter care in addition to what is already in existence; alternatively, such a plan could be developed jointly by the State and City Departments of Social Services. It is not sufficient for the State and City Offices of Mental Health to deploy mental health staff and/or service packages in existing shelters. The existing public shelters have been shown to be either of poor quality or highly restrictive, and all are severely overcrowded; new shelters of decent quality, offering needed clinical attention, should be established by the State Office of Mental Health or with its assistance.

Long-term Measures

1. Long-term supportive housing is essential to complete the range of sheltering arrangements needed for homeless adults. Rents should be kept low in accordance with Supplemental Security Income and welfare benefits and should be determined on a sliding scale basis. Heat, hot water and bathroom facilities should be maintained in good working order; complaints should be heard and attended to. An attractive atmosphere, with physical surroundings maintained in good repair can help promote a sense of self-worth and dignity in residents. A common lounge space for organized recreation and informal socialization and a dining room where meals can be had at a minimal cost should be provided. Laundry facilities and provisions for independent cooking should also be made available. In addition to a pleasant physical setting, services should include assistance in managing medication

and money, regular clinial attention, advocacy in obtaining entitlements, referrals to vocational training programs and hospitals when necessary, an on-site work program, and recreational activities. A tenants' council should be organized to serve as a forum for presenting grievances, dealing with common problems and shaping house policies. Care should be taken to see that residents' well-being is safeguarded, but no one should be excluded for failing to comply with the prevailing norms of polite society regarding appearance or behavior. That such provisions are feasible is apparent from the example of St. Francis Residence in New York City. The residence was created by St. Francis of Assisi Church in a 106 unit SRO hotel, bought with church monies last September. The church anticipates that within the year operating costs will be met by rental intake alone, even while rent levels are maintained at $35-45 a week. Were there more such facilities available, many of the homeless would undoubtedly put down their belongings and stay.

2. The issue of community opposition to the establishment of shelters is a thorny one, but it is essential to recognize that the community maintains an advisory authority to review proposals and to recommend alternate sites, but not to veto the establishment of a shelter which is serving a legitimate public purpose. It is important, of course, that operators be sensitive to the concerns of the surrounding community. Operators of shelters must make a concerted effort to maintain personal contact with the business, religious, and neighborhood groups in the area, as well as with the police precinct and local merchants. Community

involvement on a paid or volunteer basis in the operation of shelters should be sought.

Community resistance may not be the intransigent obstacle it is often presented as: Community Boards #2 and #8 in New York City have unanimously approved a resolution indicating their willingness to have a small shelter within their district areas. Other Community Boards are currently being approached to develop similar resolutions.

3. Investigation of appropriate sites for small and larger shelters and long-term residences should be pursued by city and state agencies. Possible structures to be examined should include _in rem_ buildings, existing SRO hotels and unused hospital and school buildings.

4. Technical assistance and start-up funding from both city and state sources should be targeted specifically for groups who wish to establish housing for the homeless.

5. The current New York State regulations for the establishment and operation of adult residential care programs must be revised to accommodate the needs of homeless people and to assist those voluntary organizations interested in establishing shelters. The public sheltering facilities for men are in violation of existing standards to an extreme. At the same time, the standards, particularly those regarding the physical space, health, safety and fire codes, serve to prohibit voluntary organizations from establishing licensed shelters for the homeless. Such standards can only be complied with when adequate public funding

is made available. The regulations should be revised along lines that will allow the homeless ready access, will reduce the personal costs which currently are attached to the offer of a bed and food, and will ensure that every effort is made to provide secure, clean shelter. At the same time, regulations should allow some flexibility to groups who are providing high quality care in a small, non-institutional setting. Finally, mechanisms must be devised to see that such revised regulations are enforced.

6. The Social Security Administration and the Department of Social Services should provide special assistance to homeless people to help them apply for benefits, gather the necessary documents, complete forms, and untangle problems which may arise regarding the delay, suspension or reduction of checks.

Preventive

1. The Supplemental Security Income allotment of $301.21/mo. to the elderly, physically or mentally disabled who live alone is insufficient to cover the costs of adequate nutrition, transportation and social activities and to rent decent housing on the competitive market in New York City. Similarly, the Home Relief benefits of $94/mo. for living essentials plus the maximum shelter allowance of $152/mo. for those living alone are insufficient. Increasing the Supplemental Security Income and Home Relief benefits can be expected both to allow some of those currently homeless to secure housing and to prevent those subsisting marginally from becoming homeless.

3. A review of the J-51 tax incentive used by developers to convert SRO hotels into middle and upper class residences is called for to prevent the further destruction of an affordable housing resource for the dependent and disabled residents of New York City.

4. The consequences of the mental health policy of deinstitutionalization demand reparation. The most recent policy changes, including a slight loosening of admission criteria and the requirement of an address before discharge, have been instituted after a decade of damage. The assertion of the State Office of Mental Health in its Five Year Comprehensive Plan for 1981 that "the basic needs of the 'street people' - food, shelter, bath, clothing, medical care - are the responsibility of the social welfare system" must be reconsidered. The State Office of Mental Health should retain some of its responsibilities to this population rather than passing the problem on to the inadequate and overburdened social welfare system of New York City.

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